  

Export Capacity Support for Small exporters from Asia-Pacific (ECSAF) least developed countries in specialty food value chains

Application Form

**Workshop on the Canadian Market Access Requirements and Trade Opportunities**

***Deadline for Application: August 20, 2018***

*The applicants are requested to provide information on the application form and at LFO Canada website as follows*

1. Visit the website at <http://www.tfocanada.ca> to access more of TFO Canada's content and client services and register new user at <http://www.tfocanada.ca/register.php>
2. Nomination should be completed by the candidate in block letters or typewritten form
3. Submit the Filled Application Form as state below and your official company’s profile to Mr. Ronnarit Chaiyo-saeng at [ronnarit@mekonginstitute.org](mailto:ronnarit@mekonginstitute.org) by August 20, 2018
4. MI will communicate with you through Email. Please ensure that your email is at current status.
5. No written notification will be sent to unsuccessful applicants.

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| **Please select ✓ the venue for attending the workshop below;** | | |
|  | 1 | **Phnom Penh, Cambodia** on Monday, August 27, 2018 @Sunway Hotel |
|  | 2 | **Vientiane, Laos** on Thursday, August 30, 2018 @Don Chan Palace Hotel & Convention |
|  | 3 | **Mandalay, Myanmar** on Monday, September 3, 2018 @Mandalay Regional Chamber of Commerce and Industry |
|  | 4 | **Yangon, Myanmar** on Wednesday, September 5, 2018 @Summit Parkview Hotel |

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| Part I: Participant’s Criteria |
| * Senior – middle level from specialty agro-food SMEs from Cambodia/ Lao PDR/ Myanmar; * Basic degree or equivalent educational background with minimum of 3 to 5 years of working experience in specialty agro-food sector; * Able to communicate (speak, understand, read and write) in English; * Sufficient professional capacity to actively participate cross-culturally at an international level; * Committed to attend the entire workshop; * Interactive and participative at the workshop; * Maintain effective coordination with the MI and TFO Canada coordinator. |

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| Part II. Participants’ Statement | | | | | | | | |
| Title | | Given Name  (*As shown in ID or Passport*) | | Family Name  (*As shown in ID or Passport*) | | | | |
| [ ] Mr.[ ] Ms.[ ]Dr. | |  | |  | | | | |
| Nationality | | Country of Residence | | Date of Birth | | | | |
|  | |  | | *Day* | | *Month* | *Year* | |
|  | |  |  | |
| Position & Work Address (include department or section as relevant) | | | | | | Contacts | |
| Title of your position: ­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Division, Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Export Experience (Yes or No)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | Tel:  Fax:  Mobile:  Email:  *[Ensure that your email account is at current status]*  Website: | |
| Brief Description of Your Product(s), Work Duties and Responsibilities | | | | | | | | |
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| Educational History | | | | | | | | |
| Years Attended | Institution Name, City, Country | | Degree, Diploma, Certificate, Training Courses completed | | Special fields of study | | | |
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| Languages Capacity | Read | | | Write | | | Speak | | | |
| Mother Tongue: | Excellent | Good | Fair | Excellent | Good | Fair | | Excellent | Good | Fair |
| English |  |  |  |  |  |  | |  |  |  |
| Others:  [PLEASE SPECIFY] |  |  |  |  |  |  | |  |  |  |

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| Expectations: Please describe how you will utilize the knowledge from this training program back in your country / organization / company. |
| I certify that I...………. |
| Please highlight the box in black  I commit to fully attend all the activities of the workshop;  I will maintain effective coordination with the MI and TFO Canada coordinator;  I will be interactive and participative at the training program;  Candidate selection will be made based on compliance of all the above requirement. |
| **Undertaking by the applicant:**  I certify that my statements in this application are true, complete and correct to the best of my knowledge and belief.  Applicants’ Signature: Date: |