



國際土地政策研究訓練中心

INTERNATIONAL CENTER FOR LAND POLICY STUDIES AND TRAINING

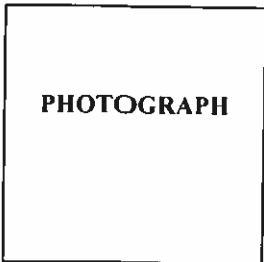
574 Chungshan Road, Taoyuan District, Taoyuan City, Taiwan Tel.: (Int.+886)-3-3324622 e-mail: iclpst@iclpst.gov.tw

APPLICATION FORM

Course: The 147th Regular Session on Infrastructure Development and Planning (online course)

Please Note:

- 1. Candidates with poor rating in spoken and written English will not be considered.
2. Candidates must be persons who are presently working in the areas related to the subject matter of the session.
3. All sections of the application form must be completed.



Section A (To be completed by applicant) (Please Type)

1. Name: First (Given) Middle Last (Surname)

Name in Chinese if any:

2. Title: Dr. Mr. Ms. Miss Other

3. Nationality:

4. Date of Birth:(month/dd/yy)

5. Gender: M F

6. Height: Over 185cm. Please specify cm.

7. Marital Status: Single Married

8. Religion:

9. Home Address:

Tel.: Country Code: No.:

E-mail: (personal)

10. Training Abroad:

11. Education Background

<u>Degree</u>	<u>University or College</u>	<u>Subjects</u>	<u>Graduation Date</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

12. Agency that you are working for: \_\_\_\_\_

Position: \_\_\_\_\_

Description of Work and Responsibility: \_\_\_\_\_

Tel.: Country Code: \_\_\_\_\_

No.: \_\_\_\_\_

E-mail: (work) \_\_\_\_\_

Previous Work Experience: \_\_\_\_\_

13. Reasons for Participation: \_\_\_\_\_

14. Signature: \_\_\_\_\_

Date:(mm/dd/yy) \_\_\_\_\_

**Section B (To be completed by Head of Institution or Department)**

1. Assessment of Applicant:

Level of spoken English: Poor  Fair  Good  Very Good  Excellent

Level of written English: Poor  Fair  Good  Very Good  Excellent

Any additional languages spoken other than native language: \_\_\_\_\_

2. I recommend / do not recommend the candidate

Recommending Authority: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Section C (To be completed by ROC Embassy or Representative Office)**

I recommend / do not recommend the candidate

Officer-in charge: \_\_\_\_\_

Title: \_\_\_\_\_

Signature/Official Stamp: \_\_\_\_\_

Date: \_\_\_\_\_

Comments: \_\_\_\_\_