



Fayoum University Institute of Strategic Research and Studies for Nile Basin Countries

Application Form to attend a fully funded Training Course entitled:

"Geographic Information Systems"

6th - 17th May, 2018

Deadline to submit your application is Thursday 15th March 2018

Completed Applications are to be scanned and sent to: <u>inssr@fayoum.edu.eg</u> & <u>maa06@fayoum.edu.eg</u> (in addition to the other requirements indicated in the course brochure)

Fayoum University, Egypt

	PART - I	Recent Photo here
Nationality:	Name of Course:	

Institute:		Commencing from	to	(
1. Personal information				
Name(s):				
Surname:				
Sex (tick one): MALE / FEMALE				
Marital Status:				
Date of Birth: Date - Month – Ye	ar			
Passport No.: Valid Till:		_ Date & Place	e of Issue:	
Addroop	Office		Homo	
Address	Once	,	Home	
Tel Nos.				
Mobile/Cell:				
Fax:				
E-mail:				
Special dietary needs, if any:				
Person(s) to be notified in case	e of En	nergency		

	Official Contact		Personal / Family Contact
Name:			
Address:			
Tel Nos.			
Mobile/Cell:			
Fax:			
E-mail:			
Educational Qualification(s)			•
Degree / Diploma / Certificates	Year		Name of Educational Institute
1.			
2.			
3.			
4.			
Professional Qualification(s), it	f any:		•
Professional Qualification(s)	Year		Name of Institute
1.			
2.			
3.			
4.			
2. Details of Employment/ Prof	ession (cur	rent & previou	us)
Name of Employer /	Position	Period	Description of work
Department / Company			
1.			
2.			
3.			
4.			
Are you an employee of: (Mark	appropriat	e box)	
a. Government	b. Semi-go	vernment 🗆	c. Others
Details of present employer			
Name		/	address:
Tel. No.:			
E-mail :			
3. Have you ever attended a co one)	urse spons	ored by the G	overnment of Egypt? (Mark
			YES/NO
If answer to 3 is yes, details of th	e Course		
4. Please describe in your own	words (ma	x 250 words):	
(a) qualification/experience in(b) reason(s) for applying for			ed for; and

5. English lang	uage proficie	ncy		
	Good	Basic	Remarks	
Spoken				
Written				
Mother tongue	/ Native lang	guage:		/ Other language(s), if any:

To be attached with the application:

- Certified English translated scanned copy Bachelor or Master degree/diploma.
- Certified English translated scanned copy Bachelor or Master transcript/grades.
- CV/Resume in English.
 Proof of English proficiency, if any.
- Motivation letter.
- Copy valid passport.

PART – II

To be completed by the authorized official of the Nominating Government/Employer

I, _____on behalf of the Government of ______certify that:

I have examined the educational, professional and other certificates quoted by the nominee in Part – I of this form and I am satisfied that they are authentic and relate to the nominee.

The nominee has adequate knowledge of spoken and written English to enable him/her to follow the course of training for which he/she is being nominated.

I nominate Mr./Mrs./Miss ______ on behalf of the Government of _____/as employer.

Name of Nominating Authority:
Designation:
Address:
Date:
Place:

Signature (With seal) Name and Designation (in capital letters)
