



**TOGETHER**  
*for a sustainable future*

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INSTITUTES IN DEVELOPING COUNTRIES

Athens, Greece, 4 to 18 July 1967

FORM FOR THE NOMINATION OF PARTICIPANTS

(This form in quadruplicate should be submitted to the Resident Representative of the United Nations Development Programme not later than 20 April 1967)

The Government of \_\_\_\_\_

nominates the person described below to participate in the Workshop.

1. Last (family) name: \_\_\_\_\_ First (given) name: \_\_\_\_\_

2. Mailing address: \_\_\_\_\_  
\_\_\_\_\_

3. Date of birth: \_\_\_\_\_ 4. Sex: \_\_\_\_\_  
Day Month Year Male Female

5. In case of emergency, notify: Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Name and address of agency in which participant works: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Title and position currently occupied: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Language(s) in which he is able to participate in the Workshop.

	<u>Speak</u>	<u>Read</u>	<u>Write</u>
English	_____	_____	_____
French	_____	_____	_____

9. Education and relevant experience (including publications):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Certifying Government Official

\_\_\_\_\_  
Signature of Applicant

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

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

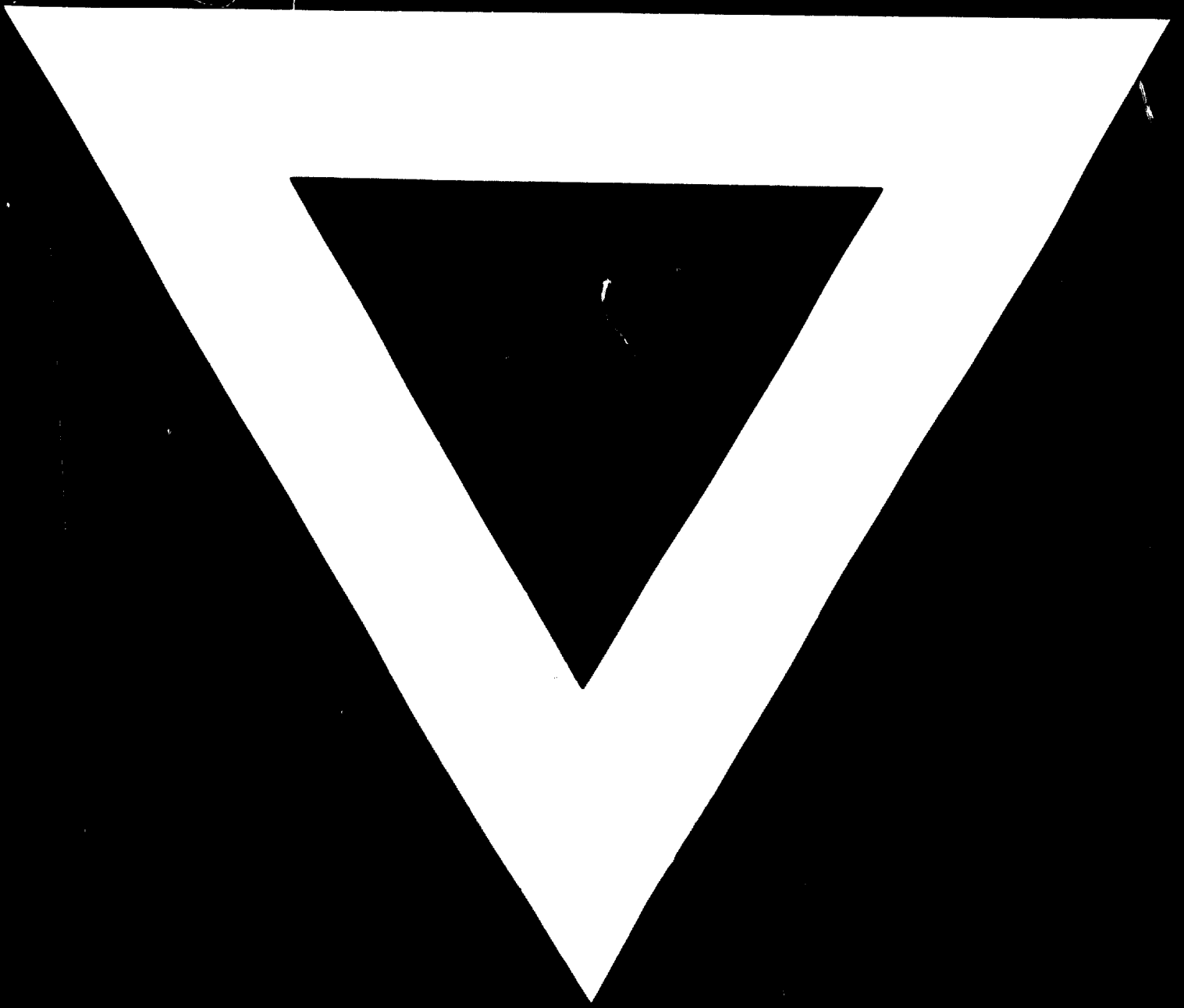
Signature: \_\_\_\_\_

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

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

Place: \_\_\_\_\_





**20 . 10 . 71**