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| APPLICATION FORM FOR IUTC TRAINING IUTC 로고2International Urban Training Center under the support of**UN-Habitat_logo_NEW_blue**341-6 Saengtaegongwon-gil, Bukbang-myeon, Hongcheon-gun, Gangwon Province 250884, Republic of Korea**Tel:**+82-33-248-6584 / **E-mail:**bluesky11301@naver.com / **Homepage:**<http://iutc.gwd.go.kr>**Note:** Please be sure to type in the form in English alphabets, not in hand-writing as this will not be accepted. Double click ([ ] ) and select “checked” in order to choose your option. The words "NIL" or "N/A" should be used where applicable. Do not leave any space blank.  |

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| Attach your scanned photo here |

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| TITLE OF COURSE – Localizing the Sustainable Development Goal 11 in Asian Cities: Planning and Implementation of Housing and Slum Upgrading |
|  |
| I. personal data |
| First Name |  | Middle name |  | Last name |  |
| Date of Birth (dd/mm/yyyy) |  | Sex (M/F) |  |
| Nationality |  | Marital Status |  | Religion |  |
| Passport Number |  | Airport of Departure |  |
| Passport Issuance Date (dd/mm/yyyy) |  | Passport Expiration Date (dd/mm/yyyy) |  |
| Home Address |  |
| City |  | Postal Code |  | Country |  |
| Phone |  |  |  | Fax |  |  |  |
| country code | area code | number | country code | area code | Number |
| Mobile |  |  |  | E-mail Address |  |
| Emergency Contact  |  | Phone |  |  |  |
| Full name | country code | area code | Number |
| Special diet: |  |
| Dish: I like very much |  | I don’t like/eat |  |
| VISA: I need an invitation letter to apply for entry visa issuance**.**  | YES [ ]  | NO [ ]  |  |
| If yes, I plan to apply at the Korean (Embassy/Consulate) in: |  |  |
| City | Country |
|  |
| II. employment and Education  |
| Present Position/Title: |  |
| Department or Division: |  |
| Name of Organization: |  |
| Address:  |  | City |  | Country |  |
| Phone |  |  |  | Fax |  |  |  |
| country code | area code | number | Country code | area code | Number |
| Type of Organization: |  [ ]  Governmental/Public  | [ ]  Private | [ ]  International | [ ]  other |  |
| Term of Employment from (dd/mm/yyyy) |  | to present |
| Please describe your present duties below *(Please describe in detail)* : |
|  |
| **Career over the past 5 years** |
| Name of Organization | from | to | Position/Responsibilities *(Please describe in detail)* |
| month/year | month/year |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Education and Training**  |
| Name of Institution | from | to | Field of Study and Degree |
| month/year | month/year |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Former Training in IUTC or KOREA (if any):** | YES [ ]  | NO [ ]  |  |
| Program: |  | Period:  |  |  |
| Organization: |  | month/year | month/year |
|  |
| III. LANGUAGE PROFICIENCY – ENGLISH Double click ([ ] ) and select “checked” in order to choose your option. |
|  | Excellent | Good | Fair | Poor | Remarks  |
| Listening  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| Speaking | [ ]  | [ ]  | [ ]  | [ ]  |  |
| Writing | [ ]  | [ ]  | [ ]  | [ ]  |  |
| Reading  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| Mother Tongue |  |
| Other Languages  |  |  |  |  |
| In case you speak English as a foreign language, it is required for you to certify your English proficiency. Please indicate any of your English Proficiency Tests if you have any: |
| [ ]  TOEFL |  | [ ]  TOEIC |  | [ ]  Others: |  | [ ]  None |
| Score | score | score |
| IV. FINANCING THE COURSEDouble click ([ ] ) and select “checked” in order to choose one or more possible funding measures you can accept. |
| Self-Paid | My organization/I will cover the costs for international transport and home country transport, accommodation and meals. **(OECD)** \* Instead, I request for waiver of fee for accommodation and meals. **(Non-OECD)** | [ ]  |
| Partial Fellowship | I apply for a partial fellowship for accommodation and meals.(My organization/I will cover all costs of international and home country transports instead.) | [ ]  |
| Full Fellowship | I apply for a full fellowship for international roundtrip airfare, accommodation and meals. (\* IUTC is not responsible for home country transport and DSA.) | [ ]  |
|  |
| V. STATEMENT OF MOTIVATION AND WHAT YOU WANT TO GET |
| 1. State your motivation to participate in this training course *(Please describe in detail)* :  |
|  |
| 2. Describe what you expect from this course *(Please describe in detail)* :  |
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| VI. APPLICANT'S RESPONSIBILITIES |
| If accepted as a participant, I agree:1) to follow the training program to the best of my ability and abide by the rules of the IUTC in which I undertake training;2) to refrain from engaging in political activities, or any form of employment for profit or gain;3) to return to my home country upon completion of my training program and to resume work in my country;4) not to shorten or extend the length of my training or my stay for personal conveniences;5) not to bring any family members (dependents) to Korea;6) to accept that the IUTC is not liable for any damage or loss of my personal property;7) to accept that the IUTC will not assume any responsibility for illness, injury, or death arising from extracurricular activities, willful misconduct, or undisclosed pre-existing medical conditions; however, IUTC will insure against each trainee’s safety/accident during the training period;8) to carry out such instructions and abide by such conditions as may be stipulated by the IUTC in respect to my training program;9) to pay all cancellation charge or full round trip airfare, depending upon the amount requested by travel agency, in case I make cancellation of course participation after the flight ticket has been issued (This applies only to full fellowship applicants.);**I fully understand that my status as a participant may be terminated if I fail to make satisfactory progress, or for any other cause as determined by the IUTC.** |
| **Applicant's Name:** |  | **Signature:** |  |
| The signature should be inserted this page. |
| VII. OFFICIAL NOMINATION |
| The  |  | of |  | officially recommends |
| (Title of the Head) | (Name of Organization/Institute) |
|  | for participation in |  |
| (Full Name of Applicant) | (Name of Training Course) |
| as organized by the IUTC and UN-HABITAT, and certifies that:1) all information provided by the applicant is complete and correct;2) the applicant has an adequate knowledge of and/ or expertise in the training field;3) the applicant has a sufficient proficiency of spoken and written English to enable him/her to follow the training course. |
| Name of Organization:  |  |
| Position/Title: |  |
| Name of Authorized Official: |  |
| **Date:** |  | **Signature:** |  |
| dd/mm/yyyy |
| The signature should be inserted this page. |
| Please send your application documents by email only, **to ALL email addresses below**.Do not send them by fax or any other means. You are kindly advised to contact us to confirm the receipt of your application form:**IUTC**Mr. Yeonghoon Kim bluesky11301@naver.com**UN-HABITAT**Ms. Trang Nguyen Trang.Nguyen@unhabitat.org Ms. Chanya Wang unhabitat.intern822@unhabitat.org **Training Venue**International Urban Training Center (IUTC)341-6 Saengtaegongwon-gil, Bukbang-myeon, Hongcheon-gun,Gangwon Province 250-884, Republic of Korea**Tel.** +82-33-248-6584 **Homepage:** <http://iutc.gwd.go.kr> |