

Participation Form

International Training Course on Regulatory Functions for the Security of Nuclear Material, Nuclear Facilities and Associated Activities

Hammamet, Tunisia

29 November–10 December 2020

To be completed by the participant and sent to the competent national authority (e.g. Ministry of Foreign Affairs, Permanent Mission to the IAEA, or National Atomic Energy Authority) of his/her country for subsequent transmission to the International Atomic Energy Agency (IAEA) either by email to: Official.Mail@iaea.org or by fax to: +43 1 26007 (no hard copies needed). Please also send a copy by email to the Scientific Secretary A.Shakoor@iaea.org and to the Administrative Secretary M.Tonnellier@iaea.org.

Deadline for receipt by IAEA through official channels: 7 September 2020

Representing following Member-State/ non-Member State/entity or invited organization:		
Family name(s): (same as in passport)	First name(s): (same as in passport)	Mr/Ms:
Name of Institute/Affiliation:		
Address of Institute/Affiliation:		
Tel. (Fax) Office/Mobile:		
Email:		
Date of birth (YYYY-MM-DD):	Place of birth:	
Nationality:	Passport number:	
Date/Place of issue of passport:	Passport valid until:	

1. Education (post-secondary):

Name and place of institution	Field of study	Diploma or Degree	Years attended	
			from	to

2. Recent employment record (starting with your present post):

Name and place of employer/ organization	Title of your position	Type of work	Years worked	
			from	to

3. Description of work performed over the last three years:

4. Relevance of the event:

How do you envisage applying the knowledge and/or experience gained from the event to your current work role?

5. Language ability:

The designating authority confirms that the participant is proficient in the language in which the event is to be held.

Yes

6. Medical Status

Both the designating authority and the applicant acknowledge that the applicant shall be solely responsible for his or her fitness to travel, as well as for any medical requirements or precautions in connection with traveling to the event, including vaccinations or immunizations.

Yes

Date: **Signature of applicant:** _____

Date: **Name, signature and stamp of Ministry of Foreign Affairs, Permanent Mission to the IAEA or National Atomic Energy Authority** _____