



ASPBAE Basic Leadership Development Course 17 – 22 November 2015, Ho Chi Minh City, Vietnam



NOMINATION FORM

A. The Nominee

• Name:	
Address:	
	Photo of Nominee
Telephone:	
• Email:	
Gender:Date of birth:	
Name of organisation:	
Designation in the organisation:	
 Size of the organisation (number of staff): 	

B. Learning Objectives

Please send us a one page description on how your participation in this Course will contribute and support your ongoing work in your organizational and country context

c. Curriculum Vitae

Please enclose a copy of your latest CV which outlines details of your work experience. We are particularly interested in your involvement in adult education and lifelong learning

D. Cost-sharing Preference

a) There are very limited slots this year for fully subsidised participants. Priority will be offered to members with relatively limited budgets and/or those from poorer countries/areas in the region.

If you are applying for a full subsidy, please indicate your organisation's annual turnover (in USD) in the years 2012, 2013, and 2014 -

b) In the event that a full subsidy cannot be offered to you, please indicate if you will be able to support your participation by sharing costs. Please tick on the appropriate option below -



I/My organisation can cover my travel costs

I/My organisation can cover my local costs

<u>Please Note</u>: Local costs will be approximately USD 500 to cover twin sharing accommodation and all meals for all the days of the Course. All participants are expected to bear their visa and terminal fees, home country airport transfers, and any other overlay/transit costs as these will NOT be covered by ASPBAE for any participant.







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E. Travel Document

Do you have a valid passport for your travel to Vietnam? (Please tick in the appropriate box below)

NO

HAVE APPLIED FOR PASSPORT

F. Endorsement by ASPBAE Member Organisations

The nominee needs to secure the endorsement of two ASPBAE member organisations, one of which is not his/her own.

Endorsement 1:

Name of the ASPBAE member organisation:				
Address:				
Telephone:				
Email:				
Name of the head of the organisation:				
Signature of the head of the organization:				

Endorsement 2:

Name of the ASPBAE member organisation:			
Address:			
Telephone:			
Email:			
Name of the head of the organisation:			
Signature of the head of the organization:			

Please email this completed Nomination Form and the Enclosures to – <u>bldc2015.aspbae@gmail.com</u> **before September 10, 2015**