



**Regional Post-graduate training School on Integrated Management of Tropical
Forests and Lands**

- ERAIFT -

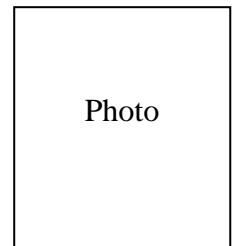
APPLICATION FORM FOR ADMISSION

Personal Information

Name: _____

Last Name: _____

First Name: _____



Date of Birth: _____ Place of Birth: _____

Nationality: _____

Sex: (M or F) Civil Status: _____

Permanent Address: _____

City: _____ Country: _____

Tel: _____ Fax: _____ E-mail: _____

Occupational Address: _____

City: _____ Country: _____

Tel: _____ Fax: _____ E-mail: _____

Qualifications*

Name of Institution	Country	Courses	From	To	Credentials

Professional

Name of Employer	Post	From	To	Country

Further Training

Courses	Institution	Country	Period	Credentials

Start with the first institution of learning.

Languages

Native Language : _____

Skills in :

Language	Speaking	Writing	Reading	Understanding
French				
English				
Others				

Excellent, Good, Average

Computer

Skills : Very good Good Average

Which software and hardware can you use :

References

Attach in an envelope three references from persons who can testify on your skills (professors, employers)

Name and title	Address / Tel.	E-mail

Sponsors

- 1- Self-sponsored _____
- 2- Sponsored by an institution _____ Name _____
- 3- Application for ERAIFT scholarship _____

I certify that the above answers are complete and correct. I agree that if I give any false information knowingly, I will be liable to dismissal if I were admitted in the school.

Date

Signature of Applicant