



APPLICATION FORM

2nd International Course on Mangrove Ecosystems in the Western Indian Ocean Region Diani Beach, 17-28th May, 2016

Please answer each question completely. All relevant information should be included here but if necessary, you may attach additional pages of similar size. Please complete in English and include a recent photo.

A. PERSONAL INFORMATION					
Surname		First name			Insert Photo
Title	Name as it appears on Passport				
Marital Status	Gender	Date of Birth (M/D/Y)	Age		
Passport Number		Place of Passport Issue			
Passport Issue (M/D/Y)		Passport Expiry (M/D/Y)			
Place of Birth (city, country)	Nationality		Country of Residence (time of application)		
Current Address			Telephone		
			Mobile		
			Email		
Permanent Address (if different from above)					

EMERGENCY CONTACT

Name	Relationship	Telephone
Address		Mobile
		Email

B. EDUCATION

Start with the most recent first

Name and Location	Start Date	End Date	Field of Study	Degree

C. LANGUAGES

Start with your mother tongue first

Language	Speaking	Reading	Writing

D. EMPLOYMENT RECORD

Start with the most recent first

Name and Address of Employer	Job title	
	Duties and Responsibilities	
Type of Organization (e.g., NGO, IGO, University, etc.)		
Name of Supervisor	Start Date (M/Y)	End Date (M/Y)
Name and Address of Employer	Job title	
	Duties and Responsibilities	
Type of Organization (e.g., NGO, IGO, University, etc.)		
Name of Supervisor	Start Date (M/Y)	End Date (M/Y)
Name and Address of Employer	Job title	
	Duties and Responsibilities	
Type of Organization (e.g., NGO, IGO, University, etc.)		
Name of Supervisor	Start Date (M/Y)	End Date (M/Y)

E. JUSTIFICATION FOR SCHOLARSHIP AWARD

ONLY TO BE FILLED IF APPLYING FOR SCHOLARSHIP TO THE TRAINING

Explain in 300-500 words the reason/s for applying for this training scholarship

Previous fellowships, scholarships, or grants for your studies (date, source, place and subject)

Are you currently studying on a fellowship?

If yes, please list the name and address of the fellowship source

F. LETTERS OF RECOMMENDATION

Please include two recommendation letters and add contact details of referees below

Referee 1 (title, first and surname)	Referee 2 (title, first and surname)
Address	Address
Telephone	Telephone
Email	Email

I hereby confirm that all the information I have given is true to the best of my knowledge

Signature _____ Date _____

For inquiry via regional node, contact the regional coordinating unit team at:

**Ms. Lilian Mwihaki
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Headquarter & Mombasa Station
P.O. Box 81651 080100
Mombasa, KENYA
Tel: +2 54735387813.
Email: lmwihaki@kmfri.co.ke / mwihakimugi@yahoo.com**

Please mail completed application form to:

**Ms. Preethi Anbalagan
United Nations University (UNU)
Institute for Water, Environment and Health
204 – 175 Longwood Rd. South
Hamilton, Ontario L8P 0A1 Canada
Tel: +1 905 667-5866
Fax: +1 905 667 5510
Email: contact.INWEH@unu.edu**

NOTE: Emails must have "**Mangrove Ecosystems In The Western Indian Ocean Region**" in the **subject line**