

The 15th International Course on AIDS Prevention and Care in Asia, 2008

Application Form

Please fill in the form clearly and honestly.

We recommend you to download this form from our website as follows

(<http://www.jfap.or.jp/english/index.htm>) and type in the form so that you can submit the form by e-mail. If you do handwriting, please fill in with BLOCK letters.

The application form must be submitted to AsiaAIDScourse@jfap.or.jp by e-mail or fax (no need to paste your photo), and full set of document (with photo, letter of approval, and CV if you have) should be sent by post by **July 20, 2008**

Date of Application / / **2008**
(Date) (Month)

Personal information

1. FULL NAME (as in Passport, underline Family Name) TITLE:	YOUR RECENT PHOTO TAKEN IN THE LAST THREE MONTHS (3cm * 4cm)
2. ADDRESS FOR CORRESPONDENCE TEL: FAX: E-MAIL1: E-MAIL2:	
3. DATE OF BIRTH (Year, month, date)	4. AGE
5. SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	
6. MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED	
7. NATIONALITY	
8. DIETARY RESTRICTION	
9. PASSPORT NO. _____ DATE OF EXPIRATION	
() I have NOT had a passport yet	

10. Educational record

Year of graduation	Institute	Country	Title of degree and major subject

11. Records of participation in the international training

Year	duration of the course	Country	Title of the training course

12. Previous working experiences

Year	Organization	job title/post	job description

13. Current work

1) Name of organization (including name of Department, Division or Section)

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2) Type of Organization

Governmental/Public NGO International Organizations Others.....

3) Current post/title

4) Mailing Address of your current organization:

Address:.....

TEL:FAX.....

E-mail:

5) Briefly describe about your current job (How is your job related to your country's scale-up for universal access to HIV or TB/HIV interventions?)

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14. English Proficiency

- 1) Have you ever been tested for your English proficiency?
 No
 Yes → actual examination and I have official score report
 preparation exam (trial exam)
TOEFL - Score.....Year.....
TOEIC - Score.....Year.....
Other (please specify)Score.....Year.....
- 2) Can you give a presentation in English?
 yes, but I need an English script to read when I present
 yes, I can present without English script
- 3) Can you write an English report (about 1,000 words-length)?
 yes, but I have to prepare report in my own language and translate to English later
 yes, I can prepare English report although there might be some English mistakes
 yes, I can prepare English report with minimum English mistakes
- 4) English listening skill
 I can understand all or almost all of the CNN or BBC news
 I can understand about 75% of CNN or BBC news
 I can understand about half of CNN or BBC news
 I have never listened to English news

15. Motivation to apply for the course

1) What do you expect from the course? (What is the points that you expect the Course to help improving yourself?)

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2) Tell us why you want to attend the Course?

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3) What is your potential topic for operational research or for your action plan to scale-up the HIV or TB/HIV interventions?

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16. Justification for application (please honestly provide the valid answer)

qualification and justification	your answer (Yes, No or other explanation)
1) Are you about 28-40 years? If you are over 40 years, what is the reason that the Course should select you?	
2. Are you a citizen of the following countries and living in your own country? Bangladesh, Cambodia, China, India, Indonesia, Korea, Lao PDR, Malaysia, Mongolia, Myanmar, Nepal, the Philippines, Sri Lanka, Thailand, Vietnam, and Japan.	
3) Are you working in a government or Non-Government/ non-profit organizations?	
4) Do you have direct responsibilities in planning, implementing, or making decision on scaling up HIV or TB/HIV interventions in the district, provincial or national level or working for specific vulnerable population?	
5) Can the Course interview you by telephone? () No because..... () Yes please call me at: number (country code-area code-telephone number): date/time (from what time to what time?):.....	
6) Can you use computer to make a report or a presentation?	
7) Do you have good physical and mental health for international traveling and intensive training?	
8) For female applicants: Can you avoid being pregnant during October-November 2008?	
9) Can you commit to work for HIV/AIDS program at least for 1 year after you finish the training?	
10) Can you certify that the information which you provide in this application form are valid? If you intentionally provide fake information, you understand that you will be sent back to your country immediately and you must be responsible for the air ticket cost.	

How do you know about this Course? Who provided you this application form?

- () The Ministry of Health nominated me to attend the Course
- () I knew about the Course by myself from JFAP web site
- () My supervisor/my colleagues/my friend recommended me about the Course

Endorsement

The applicant must submit this endorsement form together with the application form.
The application must be certified and endorsed by an authorized person of the applicant's organization or supervising organization.

Applicants Name:.....

- **I certify that I have examined the information provided by the applicant and I endorse this application.**
- **I will be willing to provide additional interview by telephone or email.**
- **If I can NOT provide additional information which may be inquired by the Course, the applicant may NOT be qualified for the selection process.**

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Signature of endorser

Date:

Name of endorser (print)

Position:.....

Organization.....

Country.....

Tel:.....Fax.....

Email :