



*International Union of Pure and Applied Chemistry (IUPAC)
United Nations Educational, Scientific and Cultural Organization (UNESCO)
United Nations Industrial Development Organization (UNIDO)*

SAFETY TRAINING PROGRAM

Training for Safety and Environmental Protection in Chemical, Pharmaceutical and Biotechnological Research and Production

Fellowship Application Form

Instructions

1. Applicant is to complete this form, including a *curriculum vitae* or resumé, and submit these items by mail, e-mail, or fax to:

Dr. Mark C. Cesa
Chair, IUPAC Committee on Chemistry and Industry
Coordinator, IUPAC-UNESCO-UNIDO Safety Training Program
Innovene USA LLC
150 W. Warrenville Rd., MS F-7
Naperville, Illinois 60563 USA
TEL: [+1] 630-420-5651
FAX: [+1] 630-420-5690
E-MAIL: mark.cesa@innovene.com

2. The Applicant must arrange for a Supporting Letter to be sent to the above address from a Nominator who is a senior official of the corporation or educational or governmental institution employing the Applicant. The Supporting letter should include the following:
- Comments on educational qualifications, experience in the field(s) where training is requested, age, health, and character of the Applicant.
 - Comments on the linguistic ability of the Applicant.
 - Comments on the proposed country(ies) of training, training institutions or firms, and duration of training.
 - Comments on the use to be made of the Applicant's training upon return home.
 - The Nominator's address, telephone number, and e-mail address.

By completing this form and supporting letter, the Applicant and the Nominator certify the following:

- The training to be undertaken under this program is necessary for the industrial development of the Applicant's home country, and that in this sense full use would be made of the results of this training;
- All information supplied by the Applicant is complete and correct;
- The Applicant has adequate knowledge, appropriately tested, of a language which can be used for training purposes in the proposed host country(ies);
- The absence of the Applicant during the training abroad would not have any adverse effect on his or her status, seniority, salary, pension, and similar rights.

Further information on the Safety Training Program can be found on the IUPAC web site: www.iupac.org, or from the Secretary of COCI at the above address.

Application Form

Please complete this form in typewritten or computer form. Each question must be answered clearly and completely. Detailed answers are required in order to make the most appropriate arrangements. If necessary, additional pages may be attached.

1. Family Name (Surname):	<input type="text"/>
2. First Name:	<input type="text"/>
3. Other Names:	<input type="text"/>
4. Mailing Address:	<input type="text"/>
5. Home Address:	<input type="text"/>
6. Telephone:	<input type="text"/>
7. E-mail Address:	<input type="text"/>
8. City and Country of Birth:	<input type="text"/>
9. Date of Birth (Day/Month/Year):	<input type="text"/>
10. Nationality:	<input type="text"/>
11. Sex:	Male: <input type="checkbox"/> Female: <input type="checkbox"/>
12. Name and Address of Person to be Contacted In Case of Emergency:	<input type="text"/>
13. Native Language	<input type="text"/>

14. Other Languages Read:

	Easily: <input type="checkbox"/>	Not Easily: <input type="checkbox"/>
	Easily: <input type="checkbox"/>	Not Easily: <input type="checkbox"/>
	Easily: <input type="checkbox"/>	Not Easily: <input type="checkbox"/>

15. Other Languages Written:

	Easily: <input type="checkbox"/>	Not Easily: <input type="checkbox"/>
	Easily: <input type="checkbox"/>	Not Easily: <input type="checkbox"/>
	Easily: <input type="checkbox"/>	Not Easily: <input type="checkbox"/>

16. Other Languages Spoken:

	Fluently: <input type="checkbox"/>	Not Fluently: <input type="checkbox"/>
	Fluently: <input type="checkbox"/>	Not Fluently: <input type="checkbox"/>
	Fluently: <input type="checkbox"/>	Not Fluently: <input type="checkbox"/>

17. Other Languages Understood:

	Fluently: <input type="checkbox"/>	Not Fluently: <input type="checkbox"/>
	Fluently: <input type="checkbox"/>	Not Fluently: <input type="checkbox"/>
	Fluently: <input type="checkbox"/>	Not Fluently: <input type="checkbox"/>

18. Residence in Foreign Countries for Professional or Study Reasons:

Year	Country	Length of Stay

19. Education (Most recently attended institution first, in reverse chronological order:)

Name and Location of Institution	Years of Study	Major Fields of Study	Degrees

20. Membership in Professional Societies and Activities in Civil, Public, or International Affairs:

Organization	Activities

21. Own Publications Relevant to Requested Field(s) of Training:

22. Training is Requested in the Following Fields:

**23. Detailed Description of the Requested Training:
(This information must be precise; the training program will be based on it)**

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24. Description of the Practical Use To Be Made of This Training Upon Return Home, and how Information and Learnings Will Be Shared: