



40th International Vegetable Training Course International Vegetable Training Course on "Safe Vegetable Production" 13 - 24 November 2023 (excluding arrival & departure)

APPLICATION FORM

A.1. Personal Information
Given Name:
Middle Name:
Family Name:
A2. Date of Birth (DD/MM/YYYY)
DD/MM/YYYY
A3. Sex
□ Female
□ Male
A4. Passport number:
A5. Specify address of Thai Embassy where you will collect the visa:
A6. Date of Expiry (DD/MM/YYYY)
DD/MM/YYYY
A7. Nationality (If multiple, match with the passport number used in Question A4)
A8. Address
A9. Phone (Office):

A10. Phone (Personal/Mobile):
A11. Email:
B. EDUCATIONAL BACKGROUND
B1. Highest level of education completed?
☐ High school or equivalent
☐ Bachelor's degree or equivalent
☐ Master's degree or equivalent
☐ Above Master's degree
☐ Other, please specify
B2. Area of study?
☐ Agriculture
☐ Environmental studies and forestry
☐ Applied Sciences (other than agriculture and environment)
☐ Social Sciences (economics, sociology, etc.)
☐ Business (accounting, marketing, management, etc.)
☐ Physical Sciences
☐ Humanities and Liberal Arts
☐ Engineering, IT, Computing
☐ Please specify
B3. Year Completed:
B4. Name of Institution & Location:
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B5. Did you study Agricultural Sciences in any other college/university degree program (Other than the one noted in Question B1?)
☐ Yes (Continue with Question B6)
□ No (Go to Section C: EMPLOYMENT / EXPERIENCE)

B6. If YES (in Question B5), what was the area of study?
B7. If YES (in Question B5), what was the level of study?
☐ Bachelor's degree or equivalent
☐ Master's degree or equivalent
☐ Above Master's degree
☐ Other, please specify:
C. EMPLOYMENT / EXPERIENCE
C1. Position
C1. Position
C2. Name of Current Employer:
C3. Type of Current Employer?
☐ Academic Institution (school, college, university, etc.)
☐ Government Organization
☐ Private Business
□ NGO / International NGO
☐ International Organization (United Nations, AVRDC, etc.)
☐ Self-employed
□ Other, please specify:
C4. How many years have you been working with current employer?
C5. Employer's Address
C6. Employer's E-mail:

C7. Employer's Phone:
C8. Name of Supervisor/Head:
C9. Supervisor's Email (if different than in Question C5):
C9. Supervisor's Linar (if different trial in Question C5).
C10. Supervisor's Phone (if different than in Question C6):
C11. General area of current work (Choose the most relevant)
□ Academics / Teaching
☐ Extension / Development
□ Research
☐ Business / Marketing
☐ Administration / Finance
☐ Other, please specify:
C12. Specific area of current work
☐ Agriculture related (Please Specify:)
□ Not agriculture related
C13. Write three words related to your current job description:
The time words related to your current job description.
C14. Total years of your past working experience:
C15. Evaluate your knowledge level in the following areas:
My knowledge in plant disease and pest management
□ Good
Basic
□ Low

My knowledge in crop agronomy
□ Good
□ Basic
□ Low
My knowledge in postharvest technology management
□ Good
□ Basic
□ Low
D. ENGLISH PROFICIENCY
Course sessions will be conducted in English. Proficiency in written and oral English is required to fully
benefit from the course. Please rate your level of proficiency below:
Reading
□ Confident
□ Basic
□ Low
Speaking
□ Confident
□ Basic
□ Low
Understanding
□ Confident
□ Basic
□ Low
Writing
□ Confident
□ Basic
□ Low
F. FINANCIAL SUPPORT
Please note that WorldVeg does not provide scholarships for the 40th IVTC.
F1. Means of support
□ Employer funded
□ Donor funded □ Do
□ Self-funded / individual fund
F2. Donor's Name:
AFRICAN ASIAN RURAL DEVELOPMENT ORGANIZATION (AARDO)

F3. Donor's Address:
02, State Guest Houses Complex, Chankyapuri, New Delhi-110021, India
F4. Donor's Phone (main contact):
+9111-24100475
F5. Donor's Email (main contact):
cbdp@aardo.org
F6. Contact person at Donor's office:
Dr. Khushnood Ali,
Head Research Division,
African Asian Rural Development Organization
G. EMERGENCY CONTACT INFORMATION
G1. Person for emergency contact:
C2. Your relation with this narrow.
G2. Your relation with this person:
G3. Phone number of the emergency contact person:
G4. Email of the emergency contact person:
H. PREVIOUS TRAINING
H1. How did you learn / hear about the International Vegetable Training Course (IVTC) ☐ WorldVeg (AVRDC) / IVTC website
□ Employer / Donor
☐ Advertisement through email
□ Other, please specify:

nz. have you attended worldveg (AVRDC) training courses or workshops in the past?		
□ Yes		
□ No		
I. FOOD RESTRICTIONS		
I1. Do you have any dietary restrictions?		
□ I am a vegetarian		
☐ I do not eat beef		
☐ I do not eat pork		
☐ Other, please specify:		

J). YOUR MOTIVATION

Please state briefly your reasons for applying for this training course, your main field of interest, and how you hope to benefit from the course (maximum 250-300 words).

K). ATTACHMENTS:

- K1. Please attach a passport-size photo
- K2. Copy of passport (please scan your passport and attach to this application form)
- K3. Assurance of Position Statement (Please fill it, get it signed by your supervisor and Scan and attach it with this application together with the scanned copy of passport and photo and email all to cbdp@aardo.org



East and Southeast Asia/ Oceania

P.O. Box 1010 (Kasetsart University) Bangkok 10903, Thailand Tel: +66-2-942-8686, 8687 Fax: +66-2-942-8688

Web: www.avrdc.org

Email: info-eastasia@worldveg.org

ASSURANCE OF POSITION STATEMENT

	Place:			
	Date:			
То:				
World Vegetable Center Regional Office for East and Southeast Asia/Oceania P.O. Box 1010 (Kasetsart University) Bangkok 10903, Thailand				
This is to assure that(Name)	who currently holds the position of			
(Position	on)			
at the				
(Organization)				
in(Citv/Country)	will be granted leave of absence and will be			
assigned to the position of(Position)				
at the termination of the advanced training, should he/she be selected.				
Name:				
Signature:				
Title of position:				
Official address:	-			