

**Group Training Course for Young Professionals on Cultural Heritage Protection  
in the Asia-Pacific Region 2022**

**Application Form (2022)**

*\* All fields are required unless otherwise indicated*

Personal Information				
Honorific (title)	Type words in the 'Fill in Here' cells.		...sor, etc.	
Full Name	First Name:	Please fill in your full name <u>as shown in your passport</u> , and leave the middle and/or family name cells vacant when you don't have them.	Double click to attach your face photograph here (JPEG Format: 4x3cm)	
	Middle Name:			
	Family Name:			
Your Name on Certificate	Please click '(pull-down menu)' and you can find the pull-down button at the right end of the cell.			
Nickname (if any)	Fill in in	Please press the button to choose the item from the menu.		...course
Gender	(pull-down menu)			
Date of Birth	(pull-down);(pull-down);(pull-down)	Age	Fill in Here	
Nationality	Fill in Here			

Organisation	
Official Presentation	(pull-down menu)
	If you selected 'others', please specify below Fill in Here
Job Title, and/or Present Position	Fill in Here
Organisation	E.g. name of ministry, association, state or private company, NGO/NPO, university, or other entity you are currently affiliated with Fill in Here
Department	Name of the <i>department</i> within your <i>organisation</i> to which you are affiliated Fill in Here
Division / Unit	Name of the <i>division</i> or <i>unit</i> within your <i>department</i> (where applicable) Fill in Here
Website (If any)	Fill in Here
Office Address	Fill in Here
	Postal Code Fill in Here
Office Phone	Fill in Here
Postal Address	Please fill in in case desired shipping address is different from your office address Fill in Here
	Postal Code Fill in Here
Mobile Phone (for urgent messages)	Please fill in your mobile number or other form of communication in case of urgency Fill in Here
Email Address	Please fill in the email address that can be shared with other participants Fill in Here

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Professional History				
Professional Experience	How long have you been working in the field of cultural heritage?		Fill in Here	years
Academic Background	What did you major in at the university?		Fill in Here	
Educational Background	Name of School/ University	Duration (from-to)	Obtained Degree	
	Fill in Here	Fill in Here	Fill in Here	
Employment History	Organisation	Duration (from-to)	Job Title	
	<i>(e.g. Ministry of ****)</i>	<i>(e.g. from Feb.2015 to Mar. 2018 )</i>	<i>(e.g. Architect)</i>	
	Fill in Here	Fill in Here	Fill in Here	
Relevant Work (multiple answers: pull-down menu)	(pull-down menu)			
	(pull-down menu)			
	Please choose practices relevant to your daily work.			
	(pull-down menu)			
	(pull-down menu)			
	(pull-down menu)			
	If you selected 'others', please specify below			
	Others:	Fill in Here		
Outline of Current Job Responsibilities	Describe your current responsibilities and professional activities			
	Fill in Here			
	For details of your work, please write in the short paper.			
Participation Experience in Relevant Training Courses (If any)	Course Name/ Venue (country) / Host Institution			Date
	Including ICCROM, UNESCO, WHITRAP, JICA, etc. courses			
	Fill in Here			Fill in Here
	Please list the professional training courses outside of your country offered by official institutes or organisations.			
English Certificate (If any)	TOEFL/ IELTS/TOEIC/etc.			
	Certificate name	Fill in Here	Grade/points	Fill in Here
	Certificate name		Grade/points	Fill in Here
English Proficiency	If you don't have English Certificate, please fill in the followings from the pull-down menu			
	Listening	Speaking	Writing	Reading
	(pull-down menu)	(pull-down menu)	(pull-down menu)	(pull-down menu)

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Questionnaire	
How did you learn about this course?	<div style="border: 2px solid orange; padding: 10px; margin: 5px 0;"><i>* These questions are NOT selection criteria, just for ACCU reference.</i></div>
Where will you connect to the internet during the training course?	
Familiarity with Online Meeting on Zoom or other platforms	

I hereby certify that the above statements are true and correct to the best of my knowledge and belief. I also declare that my health allows me to undertake the whole training programme. If I were accepted, I agree:

- that ACCU Nara will publish my reports as long as they are used for the programme purposes;
- to accept all the terms and conditions presented by the organisers.

Date:

NAME IN PRINT:

Signature: