

World Heritage Studies, University of Tsukuba  
**Capacity Building Workshop on  
 Nature-Culture Linkages in Heritage Conservation  
 in Asia and the Pacific 2017 (CBWNCL)**

## APPLICATION FORM

Please complete this form in full, by computer.

### 1. APPLICANT

Family Name	First Name	Photograph
Middle Name		
Date of Birth: D/M/Y	Age	
Nationality	Place of Birth	
Expertise ( ) Cultural Heritage Field ( ) Natural Heritage Field	Gender ( ) Male ( ) Female	
In which heritage site/protected area are you working on?		
What are the main problems in this site?		

2.

<b>Affiliation:</b>		
<b>Official Presentation:</b> ( ) National authority ( ) Professional institution of national relevance ( ) University ( ) Private firm/Individual Professional ( ) NPO/NGO ( ) Others ( )		
<b>Present Position</b>		
<b>Web Site:</b> (If available)		
Office Address	Postal Code:	Country:
Office Phone No. (+ Country Code)	Office Fax No.	
Home Address	Postal Code:	Country:
Home Phone No. (+ Country Code)	Home Fax No.	Mobile (Cell) Phone No.

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Which is a preferred contact address? ( ) Office ( ) Home
Email Address Preferred: Alternatives:

**EDUCATIONAL BACKGROUND**

Academic Qualifications

Full Name of Institution and Country	College, Department	Duration (from - to)	Degree Obtained

Relevant Professional Courses

Full Name of Course, Institution and Country	Duration (from - to)	Certification Obtained

**2. PUBLICATIONS AND RESEARCHS**

List your significant publications (title, publisher and date) and/or research projects

Title	Publisher	Date

**3. ENGLISH LANGUAGE ABILITY**

Please rate your language proficiency from Excellent to Poor

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	Excellent	Good	Fair	Poor
Spoken				
Understanding				
Written				

First language:

Other languages:

**4. PROFESSIONAL ACTIVITIES**

Describe your current responsibilities and professional activities

Relevant Previous Activities	Dates (from - to)	Responsibilities

Professional Experience

( ) 5-10 years experience in the heritage conservation field

( ) More than 10 years experience in the heritage conservation field

**5. PERSONAL STATEMENT**

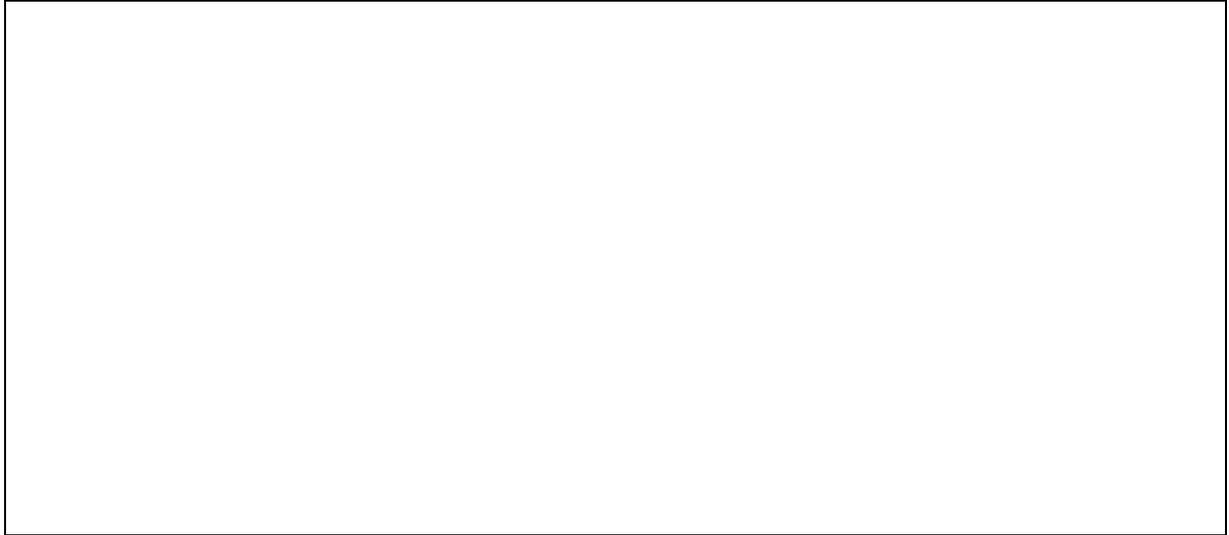
Explain why you are applying for this course, what you hope to learn from it, and how it will benefit your professional development and your institution.



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**7. Briefly describe why and how your site is considered sacred**

(Characteristics, religious groups or communities that associate with the site, traditions related to the site, cultural and natural values)



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**Short paper**

# QUESTIONNAIRE

As part of commitment to provide high quality workshop, we would appreciate your honest and constructive reactions to this workshop. All comments will, of course, be treated in the strictest confidence.

## Where did you know this capacity building workshop?

<input type="checkbox"/> A	From the University website
<input type="checkbox"/> B	From other website such as UNESCO WHC, ICCROM or ICOMOS
<input type="checkbox"/> C	From my colleagues or friends
<input type="checkbox"/> D	Other→ Please describe briefly.

## What expectation do you have during this capacity building workshop?

<input type="checkbox"/> A	I want to know techniques and policies of Heritage Conservation in Japan.
<input type="checkbox"/> B	I want to share the knowledge and experience with the other participants and resource person, and to make international network.
<input type="checkbox"/> C	Other→ Please describe briefly.

## What plan do you have after this capacity building workshop?

<input type="checkbox"/> A	I will share the knowledge and experience with my colleagues.
<input type="checkbox"/> B	I will organize a training based on the experience and knowledge from the training in Japan.
<input type="checkbox"/> C	I will propose projects for Nature-Culture Linkages in my site.
<input type="checkbox"/> D	Other→ Please describe briefly.

## OFFICIAL ENDORSEMENT

Your application will not be considered unless this section is correctly filled in by the person endorsing the application (public official, employer, or academic supervisor). The undersigned:  
Please E-mail the scanned copy of this page in PDF or jpg file.

Name of the person endorsing the application document	Title or Position	Institution or Organization
Address		
Phone No. (+ Country Code)	Fax No.	Email Address
endorses the application of the applicant: Name of the applicant		
Will the applicant's present position still be available to him/her after the workshop is over?  <div style="display: flex; justify-content: space-around;"> <span>( ) yes</span> <span>( ) no</span> </div>		
Signature of the person endorsing the application		
Date	Stamp of Institution	

## APPLICANT'S STATEMENT

I declare that the information given in this application is true and correct. I also declare that, to the best of my knowledge, my health allows me to undertake the proposed workshop program.	
Applicant's Signature	Date