

Government of the Republic of Poland

ISA / Poland

On-Land Training Programme

2022 APPLICATION FORM

INSTRUCTIONS: Please answer each question clearly. Type or print in ink. If you need more space, attach additional pages. 1. Family Name or Surname First name Middle Initial(s) 2. Date of Birth 3. Place of Birth 4. Nationality 5. Gender 6. Marital Status (Day/Month/Year) Date of Issue Place of Issue Valid until 8. Residence Address Residence Tel No 9. Business Address Office Tel No 10. Cell No. 11. Fax No.+86-020-82250265 12. Email Address Cell No. 13 Emergency Contact: Relationship Tel No. Cell No. 14. Proficiency in English Excellent Good Fair Poor Remarks Listening Listening Listening Listening Listening Listening Listening Listening								
2. Date of Birth (Day/Month/Year)3. Place of Birth 4. Nationality4. Nationality5. Gender6. Marital Status7. Passport No.Date of IssuePlace of IssueValid until8. Residence AddressResidence Tel No9. Business AddressOffice Tel No10. Cell No.11. Fax No.+86-020-8225026512. Email AddressCell No.13 Emergency Contact:RelationshipTel No. (country code-area code-number)Cell No.14. Proficiency in EnglishExcellentGoodFairPoorRemarks	Please answer eacl	h question clearly.	Type or print i	n ink. If you	u need m	ore space, at	tach additional	
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Speaking	Listening							
	Speaking							
Writing	Writing							
Reading Reading	Reading							

15. Mother Language				16. Other Language				
17. Fields/Top Scientific Int	pics of (i) erest		(ii)		(iii)	(iv)		
18. Education	n (University or	equivalent): Give fu	ll details, using th	ne following	space insofar as possible			
Year Attended		Name and Place of Institution		Field of Study (Geology, geophysics, mining, law,		Diploma or Degree (Bachelor, Master, PhD, etc.)		
From	То				etc.)			
19. Research	undertaken <i>(if a</i>	ny, Highlights, not more	than 150 words)					
20. At-sea wor	king experienc	e (Time, name of progra	mme, duration, etc)					

21. Participation in International Symposia/Workshops (If any)

22. Indicate how attending this training will further your career (not more than 250 words)

23. Employment Records (if any): Starting with your present or most recent post, list in reverse order every employment during the last ten years (if possible) and any significant experience not included in that period which you believe will be helpful in evaluating your record.

Years of Service		Name and Place of Employer/Organization	Title of Position	Responsibilities
From	То			
24. I certify th	hat the stater	nents made by me in reply to the foregoing ques	stions are true, comple	ete and correct to the best of my

knowledge and belief. If selected as a participant into the Training Programme, I confirm that I understand and will accept the following conditions:

- 1) To conduct myself at all times in a manner compatible with my responsibilities as a participant of the Training Programme and abide by the rules of the training institution and institutions in which I undertake training;
- 2) To refrain from engaging in political or commercial and any activities other than those governed by the Training Programme;
- 3) To provide all necessary information in a timely manner to the host institution and institutions to be visited so as to ensure the normal administration of the Training Programme;
- 4) To comply with the reporting requirements as stipulated by the Training Programme;
- 5) To return to my home country upon completion of my training programme;
- 6) The International Seabed Authority accepts no responsibility for the medical and life insurance of the trainee or costs and any other responsibilities arising from injury, illness or death that may occur to the trainee during the training period.

Applicant's Name (in print): _____

Signature: _____

Date:_____