



The Asian Health Institute Foundation

APPLICATION FORM

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2014 International Course on Leadership for Community Health and Development

Theme: **People's Participation in Local Governance in Health**

Date: **September 7 (Sun), 2014 - October 13 (Mon), 2014**

Venue: **AHI, Nagoya, Japan**

- Note**
- Please read the AHI Course Outline carefully to make sure your application is appropriate to your learning needs and that you meet the criteria.
 - Please type in block letters in English.
 - Name and date of birth should be **EXACTLY THE SAME** as in your **PASSPORT**.
 - Please attach a copy of your passport page with your name and birth date.

1. Name _____ / _____ / _____
First (Given) Name Middle Name Last (Family) Name

2. Nickname _____ **3. Sex** _____
(How you want to be called by friends during the course?)

4. Date of Birth _____ / _____ / 19____ **5. Age** _____
Month (e.g. January) Day Year (Age as of September 7, 2014)

6. Nationality _____

7. Sending Organization and Official Contact

Name: _____
(Please write FULL NAME of the organization)

Post Mailing Address: _____

Tel: _____ Fax: _____

Email: _____

Web site: http:// _____

Applicant's contact email: _____

Applicant's mobile phone: _____

Applicant's Position in the Organization: _____

8. Applicant's Supervisor (Contact person on behalf of your organization)

Name: Mr. / Ms.
(Choose One)

Position: _____

9. Religion Catholic Protestant Muslim Hindu None
 Buddhism Other (Please specify): _____

10. What is your mother tongue? _____

11. Do you have any Diet Restriction(s) / Allergies? (If None, Please write "None".)

12. Your Home Address (For emergency contact)

Person to contact: _____ Relation: _____

Post Mailing Address: _____

Tel: _____ Fax: _____

Email: _____

13. Family Members

Living together		Living Apart	
Name	Relationship	Name	Relationship

14. Educational Background (Attach additional sheets if necessary.)

Name of Institution / School	Year		Degree / Diploma Received, Field of Specialization
	from	to	

15. Work Experience

Please describe all Health & Development work you have been involved in up to the present, including part-time and volunteer work. (If not full-time position, please mention the status of employment.)

Name of Organization	Year		Position / Role
	from	to	

16. Have you ever visited or lived in other countries (including Japan)?

(If None, Please write "None".)

Date	Place (City, Country)	Purpose of Visit

17. What kind of work-related trainings/seminars/workshops have you participated in before?

Topics	Year	Duration	Place

18. What are your present roles and responsibilities in your organization?

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19. Describe the situation in your work area.

(Geographical, population size, cultural, social, economic and political characteristics, problems and issues people face, etc.)

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20. Describe in detail the profile of your partner People's Organization that you have been most closely working with:

(When and how it was formed? Who are the members? What are their main activities? What actions have they taken by their own initiatives to tackle what problems/issues? What is your organization's role/involvement as a partner NGO? Since when? etc. Please use additional sheets if necessary.)

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21. Describe in detail the profile of your partner Local Government that your organization has been most closely working with:

(What is the administrative area according to population size of the Local Government? What issue(s) you collaborate on with the Local Government including the local health office and health center? What is your role as a partner NGO? Since when?, etc. Please use additional sheets if necessary.)

22. Describe in detail how your organization collaborates with other NGOs in the same area?

(On what issue(s) do you collaborate on with other NGOs in the same area? What is your role? Since when? etc. Please use additional sheets if necessary.)

23. Describe in detail your concrete experience in promoting people’s participation in health (if not health, other issues) in collaboration with people’s organizations, local government, other NGOs, and other partners in a certain locality:

(Since when, your role, other partners’ roles, specific progress/achievements made etc. Please use additional sheets if necessary.) ***This question is very important in selection of participants.**

24. What do you think is the most important to promote people’s genuine participation?

25. Regarding your work strategies / approaches, what points do you want to improve?

26. What are your concrete training needs and expectations in this course?

***This question is very important in selection of participants.**

27. What concrete topics / skills can you share or lead a session in the course, aside from your concrete case on the main theme? Please list.

***This question is very important in selection of participants.**

Please certify that the above information is true and correct by signing "1. APPLICANT" of "STATEMENT OF APPLICATION"

PROFILE of THE SENDING ORGANIZATION

*** AHI considers this training a joint effort of the participant, the sending organization, and AHI. The following questions should be filled out in as much detail as possible by the person representing your organization (Not by the applicant him/herself.)**

1. Please tick (✓) the items which apply to your organization.

A. Type of organization

- National Government Local Government
 International NGO Local NGO People's Organization
 Other (Please specify): _____

B. Major focusing activities of your organization. (Plural answers are possible.)

- Health Education Environment Networking
 Gender Advocacy Agriculture Enterprise / Credit
 Community Development Research Peace Building
 Other (Please specify): _____

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C. Size of your organization.

Number of full-time staff: _____

Annual Budget for FY2014 (in US\$) _____

D. Financial resources

Self sufficiency _____ %

Local/domestic donors _____ % (names: _____)

International donors _____ % (names: _____)

Government subsidy _____ %

2. Describe your organization's Vision, Mission and Strategy.

3. Why is your organization interested in sending your staff to the AHI International Course on Leadership for Community Health and Development? How do you think this training will benefit your organization as a whole?

4. Why are you nominating this particular person to this Course? What are your organization's concrete expectations of the applicant after finishing the course?

5. Please attach your organization's brochure and activity/financial report.
(If no English version is available, attach an English summary.)

6. [Optional question] How did your organization hear about AHI and this course? (From whom? What source of information?)

*** This is for AHI's reference. Your response will NOT affect the selection process.**

Please certify that the above information is true and correct by signing "2. REPRESENTATIVE" of "STATEMENT OF APPLICATION"

ENDORSEMENT by NGO (For PO applicants only)

*** This is for PO applicants only, to be filled out by the partner NGO representative who recommends PO applicant. Not required for NGO applicants.**

1. How does your organization work with the endorsed People’s Organization in your area?

2. Why are you nominating this particular PO leader to the AHI International Course on Leadership for Community Health and Development? How do you think her/his participation in this course will benefit your organization as a whole?

3. What are your organization’s concrete expectations of the applicant after finishing this course?

Please certify that the above information is true and correct by signing "3. PARTNER NGO" of "STATEMENT OF APPLICATION"
