|  |  |
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|  | Kirstenbosch Gardens, Rhodes Drive  Private Bag X7, Claremont 7735,  Cape Town, South Africa  Tel: +27 (0)21 799 8491  Website: www.ioisa.org |

# Training programme in Ocean Governance for Africa

# Application Form 2019

**Course dates: 2 - 27 September 2019**

In order to apply for the TRAINING PROGRAMME you will need to complete the following steps:

1 Complete the following forms on the checklist and attach copies of any certificates required.

Application Form pgs. 2 - 5

Nomination Form pg. 6

*Please note that successful applicants will be required to complete a medical clearance form.*

1. **Email** your application by **7th May 2019**to:

[shampton@ioisa.org](mailto:shampton@ioisa.org) **OR** [Hampton.shannon@gmail.com](mailto:Hampton.shannon@gmail.com)

1. Please also refer to the IOI-SA Web page for further information and any updates.

<http://www.ioisa.org>

***Late or incomplete applications will not be considered.***

# 

Application Form

*Please fill in all sections clearly in English. Complete and detailed answers are required in order to ensure the most appropriate selection of candidates. Feel free to attach additional pages if necessary.*

# 1 Personal Details

|  |  |
| --- | --- |
| **Title** | Mr/ Ms/ Dr / other (please specify) |
| **Family name** |  |
| **First name/s** |  |
| **Gender** | M / F |
| **Age group** | 20-30 30-40 40-50 50+ |
| **Contact address** |  |
| **Contact telephone number (include country code)** |  |
| **Email address** |  |
| **Nationality** |  |
| **ID # (RSA participants) or Passport Number[[1]](#footnote-1)** |  |
| **Do you need a visa to enter South Africa?** *Visa information for entry into South Africa can be obtained from http://www.home-affairs.gov.za/index.php/countries-exempt-from-sa-****vis****as or your travel agent. Please ensure that you check your status carefully,* ***you are responsible*** *to coordinate this application.* ***IOI-SA does not cover costs associated with VISA applications.*** | |
| **Y / N** | |
| **How did you hear about the course?** |  |

# 2 Language Skills

|  |  |
| --- | --- |
| **First language** |  |
| **Other languages spoken / understood** |  |

# 3 English Language Proficiency (The language of instruction for this course is English)

|  |  |  |  |
| --- | --- | --- | --- |
| **Reading** | Excellent | Good | Basic |
| **Writing** | Excellent | Good | Basic |
| **Speaking** | Excellent | Good | Basic |

# 4 Employment History

# (Beginning with present or most recent employer and listing relevant previous positions over the past 10 years)

|  |  |
| --- | --- |
| **Position title** |  |
| Employer’s name and address and nature of business |  |
| Years of service (from – to) |  |
| Description of duties |  |
| **Position title** |  |
| Employer’s name and address and nature of business |  |
| Years of service (from – to) |  |
| Description of duties |  |
| **Position title** |  |
| Employer’s name and address and nature of business |  |
| Years of service (from – to) |  |
| Description of duties |  |

**5 Tertiary Education** (starting with most recent)\*

|  |  |  |
| --- | --- | --- |
| **Dates (mm/yyyy)**  **From - To** | **Name of Institution** | **Qualifications obtained** |
|  |  |  |
|  |  |  |
|  |  |  |

*\*Please attach copies of certificates obtained.*

# 6 Have you previously attended an IOI Training Programme? If yes, give details.

|  |
| --- |
|  |

**7 Please explain how this course will meet your training needs** and describe the practical use you will make of this training on your return home in relation to the responsibilities you expect to assume and the conditions existing in your country in your field of work.

|  |
| --- |
|  |

# 8 Funding

## Standard Course Fee: $2500 (US)

## This includes all course materials, weekday lunches and coffee/tea, and all course running costs (e.g. field excursions).

## Supplemental Fee: $3000 (US)

This includes local **self-catering** accommodation for the duration of the course and daily transport to and from the course venue.

## Please specify whether you are applying for this course

|  |  |
| --- | --- |
|  | As a fully self-funded participant, funded/sponsored by your institution or other source. |

*Please attach letter confirming financial support or proof of sponsorship.*

**Or**

|  |
| --- |
| participant to be funded by IOI-SA: |

|  |  |
| --- | --- |
|  | i) I require a full bursary to cover all costs of participation |

|  |  |
| --- | --- |
|  | ii) I require a partial bursary to assist with some costs of participation (see below) |

Please mark an X in the boxes below to indicate the costs that you applying for IOI-SA to cover.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Course fee |  | Supplemental fee |  | Flights |

### Please note that bursaries/scholarships are limited and only available for eligible applicants from African countries that meet the criteria of the various sponsors. Applicants are encouraged to demonstrate financial commitment in support of their application.

Kindly also note that successful applicants will be required to obtain adequate medical and other insurance cover for their entire stay in South Africa in connection with the training course. This expense is not covered by the scholarship package and participants are to make the necessary arrangements and cover these costs personally. IOI-SA does not organise VISAs into South Africa, although a supporting letter will be provided for successful applicants.

***I certify that my statements in answer to the previous questions are true, complete and correct to the best of my knowledge***

\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Candidate’s signature Date

# Participant Nomination Form

*To be completed by a senior official of the nominating Government entity, university or equivalent educational institution, national or regional organisation.*

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Name of nominating person, designation and organisation)*

Nominates

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(Name of nominee)*

as a candidate for the **Training Programme in Ocean Governance for Africa** (2nd – 27th Sep 2019) in South Africa and certifies that:

* all information supplied by the nominee in the attached form is complete and correct;
* the nominee has adequate knowledge, appropriately tested, of the English language; and
* the absence of the nominee from his/her place of work/study during his/her attendance at the course would not have any adverse effect on his/her status, seniority, salary, pension or similar rights.

|  |  |  |
| --- | --- | --- |
| **Name of Nominator:** |  | |
| **Designation:** |  | |
| **Postal address:** |  | |
| **Email address:** |  | |
| **Signature:** | **Date:** | **Official seal:** |

1. Please attach a copy to your application [↑](#footnote-ref-1)