

**Uganda Country Training Workshop on Environment, Community, Health & Safety in the
Development Minerals Sector**

April – June 2017

APPLICATION FORM

Read these instructions carefully and ensure you submit a full and complete application. If the application is handwritten please use BLOCK LETTERS.

Please complete this form in **ENGLISH** and return to tenders.kampala@undp.org by **March 17, 2017** using the following as your email title: **Name_Surname_District**

The size limit for attachments to the tenders.kampala@undp.org account is 10mb. For files larger than 10mb consider using <https://wettransfer.com/> or another file sharing service. The application can also be hand delivered to UNDP Offices on Plot 11, Yusuf Lule Road, Kampala.

You must complete all applicable sections of this form and provide all supporting documents and a copy of the information page of your passport. Incomplete applications will not be accepted.

Personal information	
Title	Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Other <input type="checkbox"/>
First Name/ Given Name	
Middle Name (if applicable)	
Surname /Family Name	
Date of Birth	Current Age:
Gender	Female <input type="checkbox"/> Male <input type="checkbox"/>
Country of Citizenship	
Country of Residence	
Second Citizenship (if more than one)	
Marital Status	Married <input type="checkbox"/> Divorced <input type="checkbox"/> Single <input type="checkbox"/>
Any dietary or mobility requirements: For example vegetarian, allergy to seafood, diabetic, unable to walk long distances etc.	

Personal Contact Details	
This is for your personal contact details. You will have an opportunity to provide your work address and contact details later on in this form.	
Physical Address	
Town/City	
Province	
Country	
Landline Phone Number: Main +Country Code-Area code-Number	
Mobile Phone Number: Main + Country Code-Area code-Number	
Other : +Country code-Area code-Number	
Email: Main	

Other	
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Study History	
Please provided details of your highest educational qualifications, from most recent qualification	
Full Name of Qualification	
Type of Qualification	<input type="checkbox"/> Secondary School <input type="checkbox"/> Undergraduate <input type="checkbox"/> Diploma/Technical /Vocational <input type="checkbox"/> Postgraduate
Name of Institution	
Institution Location (country)	
Year of Completion	
Did you complete this qualification and graduate?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Full Name of Qualification	
Type of Qualification	<input type="checkbox"/> Secondary School <input type="checkbox"/> Undergraduate <input type="checkbox"/> Diploma/Technical/Vocational <input type="checkbox"/> Postgraduate
Name of Institution	
Institution Location (country)	
Year of Completion	
Did you complete this qualification and graduate?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Previous attendance in capacity development related to the mining sector (name of program/activity, year; please provide a short description) <div>1. <div></div></div> <div>2. <div></div></div> <div>3. <div></div></div> <div>4. <div></div></div>
Have you previously participated in other donor aid funded programs, courses or study tours relating to the themes of the current training programme? Please list any such activity below. <div>1. <div></div></div> <div>2. <div></div></div> <div>3. <div></div></div> <div>4. <div></div></div>

English Language Competency (Anglophones)				
Please indicate your English language competency				
Native speaker <input type="checkbox"/>	Very good <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Weak <input type="checkbox"/>
English Language Competency (Lusophones)				
Please indicate your English language competency				
Native speaker <input type="checkbox"/>	Very good <input type="checkbox"/>	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Weak <input type="checkbox"/>

Current Employment	
Please provide details about your current job	
Organisation/Company :	
Position Title:	
Employer:	
Start date in current position	
What type of organization do you work for? (Give full details here)	<input type="checkbox"/> Public Sector <input type="checkbox"/> Private Sector <input type="checkbox"/> Civil Society <input type="checkbox"/> Academic
Please describe your current position (tick one but if no match found, provide position details below)	<input type="checkbox"/> Executive/Senior (Management/Professional/Academic) <input type="checkbox"/> Middle (Management/Professional/Academic) <input type="checkbox"/> Early career (Professional/Academic) <input type="checkbox"/> Other, please indicate below
Other	
Please give the number of years of professional experience you have gained since graduating with your first tertiary level qualification (e.g. your bachelor degree)	

Organisation/Company Details	
Physical address (your actual work unit and location)	
Town /City	
Province	
Country	
Landline Phone Number (Main) +Country code-Area code-Number	
(Other)+Country Code-Area code-Number	
Mobile Phone Number (GSM; Main) +Country code-Area code-Number	
(Other) +Country Code-Area code-Number	
Email (Main)	
(Other)	
For Participants Willing to Self-Sponsor Only (see Annex 2 for estimated costs)	
You are prepared to self-sponsor for the training and do not wish to compete for a sponsored place	Please indicate who will offer the sponsorship
	Myself <input type="checkbox"/> Another organization. Name: _____
You would like to be considered for sponsorship but if you are not successful due to the limited number of available places you are prepared to self-sponsor	Myself <input type="checkbox"/> Another organization. Name: _____



Draft Return to Work Project (RWP)


Please devise a draft Return to Work Project (RWP) following the below guidelines. This plan is compulsory, and we strongly urge you to discuss it in detail with your employer as well as the relevant organization. RWP's that do not have employer's support will not be considered. RWP will be refined and discussed as part of the training. Training participants are encouraged to consider whether the RWP might be merged with those of other participants attending the training to increase the scale of the impact. Annex 1 is the Report Template that will be discussed during the training workshop for your future reporting on the RWP (you are not required to complete the RWP template provided as Annex 1 for this application).

Applicants general expectations and plans based on country, employer and applicant's priorities (between 200 and 300 words-attach separate sheets if necessary)

Please explain what new skills and knowledge you expect to gain from this course. Please be as specific as possible. Please indicate which of your expectations reflect identified training needs.

Please explain how these new skills and knowledge will help you contribute to improving policies or practices in your current job. Please be as specific citing organizational plans, programs or policies.





Please explain how these new skills and knowledge will help you contribute to your country's development priorities. Please be as specific as possible, e.g. citing specific national plans, programs or policies.

Please outline a draft project that will utilize the skills and knowledge gained at the training workshop to improve the environment, community, gender, health and safety outcomes of the sector.

Employers general expectations and plans (between 200 and 300 words; attach separate sheets if necessary)

Please explain what skills /knowledge you expect the applicant to return with, and how your organization will use them

Signature and Commitments

Please note: You will be required to print this page for it to be physically signed before submitting a scanned copy along with the rest of the application form.

Applicant-Do you agree to the following commitments and acknowledgements?		
1.	To attend the training workshop in full and actively participate in activities.	
2.	To review your RWP to ensure it is aligned with your organization's work plans and expectations and collaborate with UNDP on the implementation of the RWP, including by periodically reporting on progress.	
3.	I certify that the information I have provided is true and accurate and understand that if I have provided false or misleading information, I will not be considered. I agree to abide by the conditions of the application.	
4.	I understand that my name and professional details can be entered in a database of participants and be shared among other members of the database for professional development purposes.	
5.	I give my permission for UNDP to include photographs and/ or video images of myself. The images or footage may be used by UNDP or its programme partners or other organizations including the media. Primarily, they will be used to promote awareness of the work of programme in publications and other printed materials, on websites, and in broadcast media.	
Name		
Signature		Date:
Employer (incase applicant is not the business owner) – Do you agree to the following commitments?		
1.	Support the candidate to implement the RWP as developed above	
2.	Support the candidate to transfer their knowledge to other colleagues and into work practices	
6.	To review candidate's RWP to ensure it is aligned with organizational priorities	
7.	To collaborate and involve UNDP country office in RWP validation and implementation as well as providing feedback to Programme team on implementation of the RWP after candidate returns from the programme	
8.	To accept that proposed RWP can be merged in a greater country multi stakeholder RWP to be implemented jointly with other nominated organizations	
9.	To collaborate and work with other trainees from same country as a team for the implementation of joint RWP	
10.	I certify that the information I have provided is true and accurate understand if I have provided false or misleading information, the employee's candidature will not be considered. I agree to abide by the conditions of the application.	
Name		
Position		
Signature		Date: