



Application: Hospital Emergency Preparedness and Response Course (HEPR-10)

Time: 23–27 November 2015

Venue: Bangkok, Thailand

Please send your completed application form together with a copy of your resume to john@adpc.net.

Please write legibly and use black ink.

Date of Application: _____

How did you hear about the course?

1. PERSONAL DETAILS

1. Full name <i>(to be used in the course certificate)</i>		2. Title <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> Other, specify:	
3. Nationality	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Date of Birth Age (dd/mm/yy)	4. Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married

5. Office Address

Telephone Number:

6. Mobile Number:

Fax Number:

E-mail:

7. Home Address

8. Home Telephone No.:

9. Name and address of a person to notify in case of emergency

10. Relationship

Telephone Number:

11. English Language Proficiency

12. Food Preferences

E – Excellent G – Good F – Fair

Vegetarian

Non-vegetarian

(Please tick where appropriate.)

Other, specify:

Reading

Writing

Speaking

E G F

E G F

E G F

<p>Please note that the course is delivered entirely in English and participants will only get the full benefit if they are able to understand spoken and written English.</p>
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2. EDUCATION, RELATED EXPERIENCE, AND CURRENT EMPLOYMENT

13. Education (Start with the last institution attended. Please use an additional sheet or refer to your resume, if necessary.)

Institution	Year(s) attended	Field of study	Degree
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14. Current employment (Please attach your resume for more information about your employment history.)

15. Memberships of professional societies (Please use an additional sheet or indicate in your resume, if necessary.)

16. Give a brief description of your present involvement in Hospital Emergency Preparedness and Response (HEPR) and other emergency management work.*

17. Previous hospital and emergency management experience.*

18. Special interests in the field of HEPR and emergency management.*

19. Previous course(s) on HEPR/emergency management and related subjects attended.*

a) International courses (Give name[s] of course[s], duration and dates.)

b) Courses in your country

20. Previous international travel related to training courses, seminars, study tours, etc.*

3. OBJECTIVES FOR ATTENDING THE COURSE

21. Describe the practical use you will make of this course when returning home in relation to the responsibilities you expect to assume.*

4. COURSE PAYMENT

Tuition fees and cancellation policy

- The Course Package is USD1,575 and includes the course fee, a daily meeting package with lunch and refreshments, a non-refundable registration fee of USD250, a training kit and all course materials. Please note that this package does NOT include the cost of accommodation.
- If you want to avail the accommodation package with international buffet breakfast for 6 nights at a discounted rate, the cost is USD420. This package is highly recommended. Please check (✓) your option:

- () **YES**, I would like to avail the accommodation package at a discounted rate of USD420 for 6 nights with international buffet breakfast (total course fee USD1,995).
- () **NO**, I would like to arrange for my own accommodation (total course fee USD1,575).

Note: Participants are responsible for all of their travel expenses and arrangements, daily dinner, medical/travel insurance and incidentals such as laundry, personal phone calls/fax and shipping of personal items from the course.

Cancellation of attendance should be notified at least 4 weeks prior to the start of the course, in which case a full refund (less 15% for banking charges and administrative costs) will be provided. NO refunds will be available for cancellations less than 4 weeks before the start of the course.

If the course fee is to be paid in advance via bank transfer to ADPC's account or deposited at the time of course registration in cash or cashier's check/bank draft payable to ADPC, please refer to the below bank details.

Account Name Asian Disaster Preparedness Center Foundation
Account Number 029-1-11600-0
Bank Name Kasikorn Bank
Bank Address 1019/18, Phaholyotin road, Samsen Nai, Phayathai, Bangkok 10400, Thailand
Swift Code KASITHBK

(Please include participant's name in the "Originator to Beneficiary Information (OBI)" section of the wire transfer form.)

Kindly confirm your mode of payment in the below form.

Who will pay for the course?	
Sponsor/employer <input type="checkbox"/>	I will pay personally. <input type="checkbox"/>
How will you or your sponsor/employer pay for the course?	
Via bank transfer <input type="checkbox"/>	With cash <input type="checkbox"/>
With a cheque <input type="checkbox"/>	Other (please specify): _____

Name of sponsoring organization:

Contact person: _____

Position title: _____

Address:

Email: _____

Telephone (*please include international dialing code*): _____

DECLARATION

I certify the above statements are true and complete to the best of my knowledge. If selected to participate on the HEPR course, I commit to:

- (a) Inform course organizers within 4 weeks of the start date of the course if I am no longer able to attend.
- (b) Conduct myself at all times in a manner compatible with my status as a representative of my organization and as a participant of ADPC's course.
- (c) Fully attend all scheduled study activities (provision of a certificate for the course is dependent on full attendance).
- (d) Refrain from political, commercial or any activities other than those covered by the study program.
- (e) Submit reports in accordance with my employer or sponsoring organization's requirement.
- (f) Return to my country of origin at the end of the training course.
- (g) Be fully responsible for any expenses (including medical) not covered as part of the course fee.

Signature of applicant: _____

Date: _____

How to apply

It is best to apply electronically. If you have access to an electronic version of this form, save it as a file on your computer, complete your information, save the file and email a copy **together with a copy of your resume** to john@adpc.net. If you have received this information in printed form, please return by fax or regular postal mail.

Application deadline

Applications should be submitted *as soon as possible* and by *9 November 2015 the latest*. Applications will be accepted on a rolling basis until the course is full. Course organizers will review applications and inform you as soon as possible if you have been accepted to the course. Upon registration and receipt of payment, applicants will receive detailed information concerning pre-arrival preparation.

For more information, contact:

Mr. John Abo
Program Manager
Public Health in Emergencies
Asian Disaster Preparedness Center
Email: john@adpc.net
Tel: +66 (0) 2 298 0681
Fax: +66 (0) 2 298 0012

Thank you very much for your application and ADPC will be in touch with you soon.