



## Workshop on Higher Resolution SRTM Data & Flood Modelling

**25 – 29 May 2015, Tonantzintla and Puebla, Mexico**

### APPLICATION FORM

**(To be filled in electronically, by typewriter or in legible block letters using black ink)**

Applicants should be familiar with the objectives and thematic areas to be addressed at the workshop as described in the announcement distributed with this application form. This form may be filled in English or Spanish (please refer to the announcement for information on the language of the workshop).

**Application deadline: 1 May 2015**

I hereby apply to participate in the Workshop on *Higher Resolution SRTM Data & Flood Modelling*.

#### A. PERSONAL DATA

1. Family Name: \_\_\_\_\_ First Name: \_\_\_\_\_
2. Sex (Male/Female): \_\_\_\_\_ 3. Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year
4. Nationality: \_\_\_\_\_
5. Current Title/Position: \_\_\_\_\_
6. Agency/Organization: \_\_\_\_\_
7. Principal Functions/Duties: \_\_\_\_\_
8. Official Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

**(Please verify that your E-mail address and phone/fax numbers are typed correctly.)**

9. In case of emergency contact:

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

**B. ACADEMIC AND PROFESSIONAL BACKGROUND**

10. Your academic background (degrees and a description of your fields of study):

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

11. Your professional experience relevant to this Workshop. (please see the Announcement Note)

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\_\_\_\_\_  
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12. Provide information on the programs or activities in your country that would benefit from your participation in the workshop, and your personal contribution to those programs

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\_\_\_\_\_

**C. LIFE AND MAJOR MEDICAL INSURANCE**

13. Life/major health insurance for each selected or invited participant is the responsibility of his/her institution. The co-sponsors will provide first-aid and transportation to hospitals in case of emergencies.

D. FINANCIAL SUPPORT

14. Within their limited financial resources, the organizers will provide funding support for travel and/or lodging accommodation and meals for as many participants as possible. Participants whose agencies/institutions/companies provide their air travel and/or living expenses will be considered on a priority basis. Please indicate if your agency/institution/company will cover the cost of your air travel and/or living expenses in Tonantzintla/Puebla, Mexico during your participation at the workshop.

My agency/institution/company will provide my air or land travel                      Yes ( )                      No ( )

My agency/institution/company will provide my living expenses.                      Yes ( )                      No ( )

15. The Applicant:

\_\_\_\_\_

(Signature of Applicant)                      (Place)                      (Date)

16. Head of agency/institution/company nominating the applicant (required):

\_\_\_\_\_

(Signature of Head of agency/institution/company)                      (Place)                      (Date)

\_\_\_\_\_

(Name and title Head of agency/institution/company)

\_\_\_\_\_

(Seal of agency/institution/company)

Note: The deadline for the application to be received is 1 May 2015. Once completed, this application form should be scanned and sent to the Mexico Campus of CRECTEALC as soon as possible to email: [jagonzalez@inaoep](mailto:jagonzalez@inaoep), with a copy to [ldelgado@swfound.org](mailto:ldelgado@swfound.org) and [sergio.camacho@inaoep.mx](mailto:sergio.camacho@inaoep.mx)