







Annex III

ESCAP/WMO Typhoon Committee 10th Integrated Workshop

"Innovative Strategy to Improve the Quality of Life for Members' Population through Mitigating Typhoon-related Impacts"

> 26 - 29 October 2015 Kuala Lumpur, Malaysia

NOMINATION FORM FOR PARTICIPANTS

(Please type or print)

IMPORTANT: Please submit the duly completed form by 26 September 2015 directly to Typhoon Committee Secretariat, Avenida 5 de Outubro, Coloane, Macao, China, E-mail: info@typhooncommittee.org, Fax No. +853 88010530.

1. Nominee: Dr./Mrs./Ms.					
D1./ W11./ W115./ W15.	_	First Name	Middle	Name	Last Name
2. Present position:					
3. Country:					
4. Agency/Organization:					
5. Mailing address: (Office)					
6. Fax number		E-mail:			
5. Tel. number: Office		Home/mobile:			
7. Nationality:			<u> </u>		
8. Academic degrees:					
9. Brief description of relev	vant professio	nal experience	e, including dates:		
9. Please stated your funding support: TCTF		SELF FUNDED	HRFCO (Lac	os and Vietnam only)	
Name (in block letters) and position of nominating government official			Signature		
				Date	