

WORLD METEOROLOGICAL ORGANIZATION

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WDS/PWS/CAP-2015, ANNEX

COMMON ALERTING PROTOCOL (CAP) JUMP-START TRAINING SESSION
(ROME, ITALY, 22 SEPTEMBER 2015) ¹

AND

CAP IMPLEMENTATION WORKSHOP
(ROME, ITALY, 23-24 SEPTEMBER 2015) ²

NOMINATION FORM

The Government of nominates the following technical staff member to participate at: (please indicate: 1 2 or both):

1)	Family Name:*		Prof / Dr / Mr / Mrs / Ms
2)	First Name(s):*		
3)	Name of Organization:		
4)	Address (Organization):		
5)	City and Country:		
6)	Telephone:	Office: +	Home: +
7)	Facsimile:	Office: +	Home: +
8)	E-mail:		
9)	Date of Birth:		
10)	Country and Passport No.:		
11)	Expiry Date:		
12)	Primary language**:		

(*) Note: as shown in passport;

(**) For nominees whose primary language is not English, this nomination form **must** be accompanied by a relevant language proficiency certificate as a necessary condition for acceptance.

13) Present position and brief description of duties:

14) Qualifications (certificates, diplomas or degrees):

15) Experience with CAP standard in your country (*Please indicate whether your country has implemented, plans to implement, or has no plans to implement CAP*):

16) Name and address of person to be notified in case of emergency:

17) Please complete if financial assistance is required from WMO:

- Support required:** Yes No
- Air Ticket:** Yes No
- Adjusted Daily Subsistence Allowance (DSA):** Yes No

18) Formal Concurrence of Participation:

Name and Signature of Permanent Representative:	Date :

To be completed and returned by e-mail attachment to: Mr Samuel W. Muchemi, Scientific Officer, Public Weather Services Programme (SMuchemi@wmo.int) with a copy for information to: Ms Michelle L. Reidsema (MR Reidsema@wmo.int), **as soon as possible, but preferably not later than 15 June 2015.**