**Workshop of World Meteorological Centres**

**Beijing, China, 26-29 March 2019**

**PARTICIPANT NOMINATION FORM**

**(use one form per participant)**

 Mr/Ms/Dr:      Family name:

 First name(s):

 Present position and responsibilities:

 Work address:

 Work Tel:       Work Fax:

 Work Email:

 **Please indicate if financial assistance is required for:**

 **Air Ticket**: NO [x]  or YES [x]

**Per Diem** : NO [x]  or YES [x]

 Date:       Name:

 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please complete and submit this nomination form by e-mail to Ms Eunha Lim elim@wmo.int cc: Ms Pascale Gomez pgomez@wmo.int at your earliest convenience.