**Form for Submission of Nominations for New CIMO Testbeds and Lead Centres**

(expand the cells as required to properly reflect your activities)

Terms of Reference for CIMO Testbeds and Lead Centres are available under: http://www.wmo.int/pages/prog/www/IMOP/Testbeds-and-LC.html

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| **Name of Testbed / Lead Centre(should reflect focus area)** |  |
| **Location of Testbed / Lead Centre**  |  |

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| **Contact Person for the Testbed/Lead Centre**  |
| **Courtesy Title** | Mr / Ms / Mrs / Dr / Prof / Eng / etc.  |
| **Family name** |  |
| **First name** |  |
| **Full Postal Address** |  |
| **Country** |  |
| **Tel. number(s)** |  |
| **Fax number(s)** |  |
| **Email(s)** |  |

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| **Activities** |
| **What are the main activities presently carried out by your proposed Testbed/Lead Centre relevant to your proposal?*** …
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| **Has your proposed Testbed/Lead Centre published reports / peer-reviewed publications in the last four years (please include full reference and web-link if available)?** |

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| **Infrastructure, Capabilities and Staffing, etc.** |
| **Describe your main Testbed/Lead Centre’s capabilities:** |
| **Describe your main Testbed/Lead Centre’s infrastructure:** |
| **Describe the Testbed/Lead Centre’s staffing that will support the Testbed/Lead Centre activities:** |
| **Describe the resources of your Testbed/Lead Centre?** |
| **Is a quality management system implemented at your Testbed/Lead Centre?** Yes / No |
| **If yes, please specify?** |

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| **Capacity Development and Training Activities** |
| **Which capacity development/training activities do you plan to carry out?** |
| **Has your Testbed/Lead Centre developed a twinning activity / special relationship with a companion station/site from a developing country, or will it do so in future?** Yes / No |
| **If yes, with which station/site?** |

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| **Future Plans** |
| **What are your plans for the next four years?** |
| **Is your Testbed/Lead Centre able to provide a long-term commitment (for the next eight years)** | Yes / No |

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| **Other relevant information (other activities of special interest to CIMO, etc.)** |
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| **Date** |  | **Name of Person Filling the Form** |

Note that any new proposal should be formally sent to WMO by the relevant Permanent Representative with WMO.