



## **Design and Evaluation of Innovation Policies: Evaluating the Impacts of Science, Technology and Innovation Programs**

### **Application form**

**San Salvador, El Salvador  
26-30 October 2009**

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**DEADLINE FOR SUBMISSION IS 25 September 2009!!!!**

Please answer each question clearly and completely. Type or print in dark ink. All relevant information should be included in this form but if necessary, you may attach additional pages of similar size. Please complete in English and attach a recent photograph (passport size). The form should be signed by you and your immediate supervisor.

Please send to the following address:

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|---|--|
| Sra. Eveline in de Braek<br>DEIP Programme<br>Keizer Karelplein 19<br>6211 TC Maastricht<br>The Netherlands<br>Fax: +31-43-3884499<br>indebraek@merit.unu.edu | Ing. Yax Canossa Humberstone<br>Gerente de Innovación y Desarrollo<br>Tecnológico<br>Ministerio de Economía - Dirección de<br>Calidad y Tecnología<br>Alameda Juan Pablo II y Calle Guadalupe,<br>Edif. C-1, 3a Planta Plan Maestro<br>Centro de Gobierno<br>San Salvador, El Salvador, CA<br>Tel. +503 2101-9089<br>email: <a href="mailto:ycanossa@minec.gob.sv">ycanossa@minec.gob.sv</a> |
|---|--|

A. Identification of applicant

Photo

1. Family name (surname) \_\_\_\_\_  
(underline the family name by which you are officially addressed)
  
2. Other names \_\_\_\_\_
  
3. Address for communication  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
4. Telephone \_\_\_\_\_  
(country code-area code-telephone number)
  
5. Fax \_\_\_\_\_
  
6. E-mail \_\_\_\_\_
  
7. Home address  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
8. Place of Birth \_\_\_\_\_
  
9. Date of Birth \_\_\_\_\_
  
10. Nationality \_\_\_\_\_
  
11. Marital status \_\_\_\_\_

12. Gender  Male  Female

13. Passport or ID Number \_\_\_\_\_

14. Issuing authority \_\_\_\_\_

15. Date of Issue \_\_\_\_\_

16. Place of issue \_\_\_\_\_

17. Date of Expiry \_\_\_\_\_

18. Name and address of person to be notified in case of emergency

\_\_\_\_\_

19. Relationship with applicant

\_\_\_\_\_

\_\_\_\_\_

20. Telephone \_\_\_\_\_

21. Fax

\_\_\_\_\_

22. E-mail \_\_\_\_\_

**B. Present Employment Status**

23. Country \_\_\_\_\_

24. Ministry/Institute/Organization \_\_\_\_\_

25. Functional title \_\_\_\_\_

26. Number of years of Experience \_\_\_\_\_

27. Describe your current functional responsibility: Please provide a brief description of your responsibilities. Indicate which of the following are most applicable: (a) Policy with regards to technology, innovation and innovation policy (such as policy analysis; policy evaluation; administering research grants/tax incentives; other forms of technology financing; S&T statistics; technology forecasting; policy advisory) in 250 words.

28. Describe how course content might link with your current work and responsibilities (no more than 250 words)

**C. Education**

29. University Education (start with the most recent) Name and city of institutions of study, Field of study, Years, Degree obtained. (or add your CV, if convenient)

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**D. Funding**

30. Do you have funds for travel (specify)  Yes  No

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31. Do you have funding for boarding and lodging  Yes  No

(Participants from outside El Salvador have to provide their own funding for travel, lodging and local expenses)

33. I certify that the statements made by me in answer to the foregoing questions are true, and complete to the best of my knowledge and belief.

Signature \_\_\_\_\_

Place and Date \_\_\_\_\_

**E. Supervisor's letter of reference**

Name of Applicant \_\_\_\_\_

I authorize applicant's participation to the DEIP program of San Salvador, El Salvador.

Name and address  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_

Place and Date \_\_\_\_\_