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

Application form

Dakar, Senegal
27 September – 01 October 2010

DEADLINE FOR SUBMISSION IS 30 June 2010

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 your application, preferably electronically, to the following address:

<table>
<thead>
<tr>
<th>Applicants from Senegal please send your forms to:</th>
<th>Applicants from other countries, please send your forms to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marietou Mbaye</td>
<td>Ms. Eveline in de Braek</td>
</tr>
<tr>
<td>Consortium pour la Recherche</td>
<td>DEIP Programme</td>
</tr>
<tr>
<td>Economique et Sociale (CRES)</td>
<td>Keizer Karelplein 19</td>
</tr>
<tr>
<td>Rue de Kaolack Angle F</td>
<td>6211 TC Maastricht</td>
</tr>
<tr>
<td>Point E</td>
<td>The Netherlands</td>
</tr>
<tr>
<td>Dakar 12023</td>
<td>Fax: +31-43-3884499</td>
</tr>
<tr>
<td>Senegal</td>
<td><a href="mailto:indebraek@merit.unu.edu">indebraek@merit.unu.edu</a></td>
</tr>
<tr>
<td><a href="mailto:marietoum@hotmail.fr">marietoum@hotmail.fr</a></td>
<td></td>
</tr>
</tbody>
</table>
Identification of applicant

Photo (only if available via scan)

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
PLEASE ONLY COMPLETE POINTS 13-18 IF YOU ARE NOT RESIDING IN SENEGAL

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 __________________________________________________________
A. 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 then 250 words)

________________________________________________________________________
B. 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)
C. Funding (NOT APPLICABLE FOR PARTICIPANT FROM SENEGAL)

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

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

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

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 ___________________________________________

D. Supervisor’s letter of reference

Name of Applicant ____________________________________________

I authorize applicant’s participation to the DEIP program of Dakar, Senegal.

Name and address

________________________________________________________

________________________________________________________

________________________________________________________

Signature __________________________________________________

Place and Date ______________________________________________