Design and Evaluation of Innovation Policy

Application form

Phuket, Thailand
5-9 March 2012

DEADLINE FOR SUBMISSION IS 31 JANUARY 2012

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:

Ms. Eveline in de Braek
DEIP Programme
UNU-MERIT
Keizer Karelplein 19
6211 TC Maastricht
The Netherlands
Fax: +31-43-3884499
indebraek@merit.unu.edu

Dr. Chatchalee Ruktanonchai
Director of Organization Evaluation Division
Corporate Office
NSTDA
chatchalee@nstda.or.th
or
Ms Amara Chunplang
Analyst
Organization Evaluation Division
NSTDA
amara@nstda.or.th
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 then 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.

<table>
<thead>
<tr>
<th>Language</th>
<th>Mother-tongue</th>
<th>Proficiency</th>
<th>Good</th>
<th>Basic</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td></td>
<td>Fluent</td>
<td>Good</td>
<td></td>
</tr>
</tbody>
</table>
D. Funding

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

___________________________________________________________________

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

(Participants from outside Thailand 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 Thailand.

Name and address

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

Signature _________________________________________________________

Place and Date ___________________________________________________