



TRAINER OF TRAINERS WORKSHOP
“International Perspectives in Youth Entrepreneurship Training”
 12 – 17 April 2010 | Zambia

PROGRAMME NOMINATION FORM

A) PARTICIPANT DETAILS

1. Surname: _____ First Name(s): _____
2. Sex: _____ Nationality: _____ Passport Number: _____
3. Postal or physical address (with city and country): _____

Telephone (with code): _____ Cell: _____ Email: _____

4. Briefly describe yourself (educational achievement, work experience, etc):

- 5a. Do you have any special food requirements/health conditions that you would like us to know about beforehand (this is optional and confidential)

5b. Emergency Contacts: _____

B) ORGANISATION DETAILS

6. Name of your Organization:
7. Job title:
8. Are you involved in a youth employment/entrepreneurship project? Yes/No:
- 8b. If Yes, describe the project and your role (name, target group; sex, age, income levels, educational backgrounds, etc.)

9. How much experience do you have as a trainer? None 1 to 5 years More than 5 years
 What are your areas of expertise:

10. What expectations do you have for this training programme?



11. Do you require any financial assistance or bursary for this workshop: (the organizers may offer partial bursaries to some participants upon application. Bursaries may cover only (A) tuition and materials and (B) Lodging. Bursaries will NOT cover allowance. Bursary recipients/organizations are expected to cater for their own travel to and from Zambia and local upkeep). Yes/No:

11b. If you answered YES to question 11, please motivate on how your participation in the International Trainer of Trainers Workshop will impact your current work.

(1000 words or less. Skip if you answered no to question 11)

11. Any other comments?

C. PASSPORT/VISA DETAILS

The organisers may assist registered participants to acquire entry visas. If you require a visa to Zambia, kindly attach a scanned copy of your relevant passport pages to this nomination form with your submission.

~~END | Thank you for Applying.~~

Note:

Submit completed forms to getahead@cypafrica.org.zm **Deadline for applications** for bursaries is **19th February 2010**. Successful bursary applicants will be notified by **26th February 2010**.