***Master Trainer Program***

***For the Promotion of the Cashew Value Chain in West Africa***

***Edition 3***

**Annex 1:** Application form for the Master Trainer Program

(To be completed by each applicant)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant’s surname and given names |  | | | | | | |
| Date of birth | Day | Month | Year | Nationality | Telephone | | E-mail |
|  |  |  |  |  | |  |
| Permanent address |  | | | | | | |
|  | | | | | | |
|  | | | | | | |
| Profession |  | | | Professional expertises | | 1 | |
| 2 | |
| 3 | |
| Name of affiliated organization |  | | | Responsibilities and roles within the organization | |  | |
| Name of the person in charge of the organization |  | | | Function | |  | |
| List reasons why your organization supports your application | 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Major activities of the organization |  | | |  | | |  | | |  | | |
| Describe your experiences andskills motivating you to apply for the Master Trainer program. |  | | | | | | | | | | | |
| Areas in which you have prior training that can contribute to the training program (especially agricultural products) | 1 | | | | | | | | | | | |
| 2 | | | | | | | | | | | |
| 3 | | | | | | | | | | | |
| 4 | | | | | | | | | | | |
| 5 | | | | | | | | | | | |
| 6 | | | | | | | | | | | |
| Languages | English | | | | French | | | | Other – (specify) | | | |
| Written | Spoken | Understanding | | Written | Spoken | | Understanding | Written | | Spoken | Understanding |
| In not more than 100 words summarize your profile and interest in the program |  | | | | | | | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Please enter here, topics you wish to receive training on (provide useful information of interest) |  | | |
| Terms of reference | By applying to the Master Trainer program, my organization and I have understood and accepted that I shall be available throughout the training process. The main reason for my participation in the program is to develop technical and professional skills. I am aware that this goal can only be achieved through continuous learning and interactions with other program participants.  My organization and I have understood and accepted that my presence or absence and my participation or non-participation in any session and activity will have an impact on the overall program and other participants. Thus, by submitting my application to the program, I give my consent to engage effectively in all activities related thereto  Knowingly, my application is submitted for consideration. | | |
| Place: |  | Date: |  |
|  | | | |

|  |  |  |
| --- | --- | --- |
| Name and Approval of employer |  | Name and signature of candidate |