



DEPARTMENT OF
ENVIRONMENT AND
NATURAL RESOURCES

MEMORANDUM FROM THE UNDERSECRETARY

FOR/TO : All Undersecretaries, Assistant Secretaries, Service Directors,
Project & Program Directors, and Heads of Offices
DENR Central Office

All Regional Executive Directors/Regional Directors, Bureau
Directors and Heads of Attached Agencies

SUBJECT : **Advanced International Training Programme on Solid Waste
Management**

DATE : **NOV 25 2005**

The Swedish International Development Cooperation Agency (SIDA) through the Embassy of Sweden invites our participation in the above-mentioned training programme. The programme is composed of 2 parts: a) Part I will take place at Chalmers University of Technology in Goteborg, Dalarna University, Borlange and Northwest Scanian Recycling Company (NSR), Helsingborg, Sweden, April 20 - May 17, 2006; and b) Part II will take place in one of the participating countries in November 2006.

The main purpose of this programme is to strengthen the efficiency, competence and capacity of developing countries to manage their solid waste.

Please nominate one candidate with the following general criteria:

1. Holding position as manager in the area of solid waste handling within a national or local authority
2. Graduate of Bachelor of Science in Engineering
3. 5 years of professional experience
4. 2 years in government service
5. Permanent appointment
6. Age requirement: no age limit

SIDA shall provide participation fee, accommodation and meals. However, it will not cover the airfare to and from Sweden.

The nominee must submit the attached **SIDA application form in duplication (including, medical report and language certificate)**, together with the following documents to the DENR Scholarship Committee through the Human Resource Development Service not later than **December 12, 2005**:

1. Nomination letter/Memorandum addressed to the Secretary by the Head of Office;
2. Service Record;
3. Certification of no pending administrative case
4. Certification on the following which may all be stated in one certification:
 - a. salary payment while on training
 - b. nominee's attendance in the training will not affect the operation of the unit
 - c. performance rating (adjectival and numerical) for the last two rating periods
 - d. nominee has not gone abroad within the preceding 24 months or travel histories
5. Certification of actual duties and responsibilities;
6. Certified photocopy of college transcript and diploma;
7. If married, written consent of spouse;
8. Duly accomplished Personal Data Sheet; and
9. Certification of person/organization to fund the cost of airfare to and from Sweden.

For your information and appropriate action.


ARMANDO A. DE CASTRO

71120 311



Programme in Solid Waste Management to be organised
in Göteborg, Sweden, April 20 – May 17, 2006

FOR OFFICIAL USE OF THE SWEDISH EMBASSY

Received application by administration _____

Sign _____ Date _____

Comment, see attached note ☺

APPLICATION FORM (Typewriting or block letters)

The _____ Country _____
(name of nominating organisation/institution/company)

nominates _____
(name of applicant)

To the programme in Solid Waste Management to be organised in Göteborg, Sweden, April 20 – May 17, 2006

Reasons for nomination _____
(obligatory)

Date _____

Signature of nominating organisation/institution/company _____

(When necessary/applicable)

The Nomination is approved by (name of authorising authority) _____ in accordance with local rules.

Date _____ Signature of authorising authority _____

The Application should be submitted to the appropriate Swedish Embassy/Consulate at the latest on December 20, 2005.
The Embassy/Consulate will forward it to the programme secretariat.

If no appropriate Swedish Embassy/Consulate in the country, please submit application form directly to secretariat at the latest on December 20, 2005.

Chalmers University of Technology
Department of Civil & Environmental Engineering
International Training Programmes
Att: Yvonne Young,
Programme Coordinator
SE-412 96 Göteborg
SWEDEN

Telephone: +46 31 772 21 66
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E-mail: yvonne.young@wet.chalmers.se
<http://sida.webmaster.se>

PHOTO
(Please do not glue.
Attach with Staple)

Applications received after this date will not be considered.

PERSONAL HISTORY

1 First name (underline name by which formally addressed)		Second name		Family name (surname)	
2 Office address			3 Telephone (to office). (country code/area code)		
			Fax no. E-mail (obligatory)		
4 Home address			5 Telephone (home) (country code/area code)		
			Mobile phone. E-mail (home)		
6 Nationality		Date of birth	Day	Month	Year
7 Sex <input type="checkbox"/> Male <input type="checkbox"/> Female					
8 Name and address of person to be notified in case of emergency (incl. country code/area code)					
Telephone:			E-mail:		

9 Education (start with last attended institution and work backwards)			
Name of institution and place of study	Major fields of study	Years of study from-to	Degrees
10 List membership of professional societies or other activities in civil, public or international affairs			
11 List any relevant publication you have written (do not attach)			
12 Previous residence in foreign country in relation to applicant's professional or study interest			
Have you participated in any training programme in Sweden before?			
<input type="checkbox"/> yes <input type="checkbox"/> no Name of programme, year _____			

EMPLOYMENT RECORD

In order that your application may be complete, please give details of your duties and responsibilities for each of the posts you have occupied.

A. PRESENT POSITION

Title of your post	Description of your work, including your personal responsibilities
Years of service: from-to	
Type and level of organisation	
Name of supervisor (if any)	
Name and address of employer	

B. PREVIOUS POSITION

Title of your post	Description of your work, including your personal responsibilities
Years of service: from–to	
Type and level of organisation	
Name of supervisor (if any)	
Name and address of employer	

Please state briefly the reason for applying to this programme, your main field of interest within the programme and how you hope to benefit from the programme. (Continue on supplementary page if necessary but no more than one page).

CASE STUDY

Please describe your Case Study, including title, on no more than two supplementary pages.

Enclosed description 1–2 pages

LANGUAGE REQUIREMENT

English certification does not have to be carried out if any of the following is applicable:

English is my mother tongue or official language of the country.

English is my working language (please enclose statement from management)

Carried out higher academic education (min 6 months) where English was the medium of instruction (please enclose copy of certificate)

CERTIFICATE OF THE ENGLISH LANGUAGE

Not required if any of the conditions at the bottom of page 3 apply

Name of candidate _____

ABILITY TO UNDERSTAND

- Understands without difficulty when addressed at normal rate
- Understands almost everything, if addressed slowly and carefully
- Requires frequent repetition and/or translation of words and phrases

ABILITY TO SPEAK

- Speaks fluently and accurately and is easily intelligible
- Speaks intelligibly, but is not fluent or altogether accurate
- Speaks haltingly, and is often at a loss for words and phrases

ABILITY TO WRITE

- Writes with ease and accuracy
- Writes slowly and with only a moderate degree of accuracy
- Writes with difficulty and makes frequent mistakes

READING ABILITY AND COMPREHENSION

- Reads fluently, with full comprehension
- Reads slowly, but understands almost everything
- Reads with difficulty, and only with frequent recourse to a dictionary

Language test administered by: _____

Title: _____

Address and Telephone: _____

Date and signature: _____

MEDICAL STATEMENT

- I do not have any infectious diseases (for example tuberculosis or trachoma) or any other illnesses which could present risks to persons that I will come in contact with.
- I do not have any medical conditions which prevent me from carry out training away from home.
- I am in good health and enjoying full working capacity.

Comment:

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Signature of Applicant

I certify that my statement in answer to the foregoing questions is true, complete and correct to the best of my knowledge and belief.
If selected as a participant I undertake to spend the time during the period of the programme as directed by the programme management.

Date _____ Signature of Applicant _____

If you are selected, you will be notified by fax or e-mail. **Please confirm your acceptance to attend by fax or e-mail.**