

NOMINATION FORM

Nominating Office:

Address of Office:

Telephone Numbers:

Fax Numbers:

E-mail Address/es:

Please state briefly the nominee's involvement in your institution/organization:

How will the course benefit the nominee, your institution/organization, and your institution/organization's stakeholders (please answer briefly but concisely):

The undersigned, acting on behalf of _____ hereby
(Nominating Office)

certifies/confirms the nomination of _____
(Name of Nominee)

for the “Regional Course on Research Management for Executives (RRMEX)” of SEARCA. The nominee shall be on detail at the course venue with pay to complete the three-day event at Los Baños, Laguna, Philippines. He/She is heading a research unit/institution, spends half of his/her time in research management, is likely to continue serving his/her institution for three years or longer, has a good command of the English language, and is physically fit to travel and participate in the said training course.

Name of Head of Office:

Designation:

Signature:

Address:

Official stamp/seal of office:

NOTE: This nomination form must be submitted, together with the accomplished application form for training grant and other pertinent documents, by 26 March 2012 through email (nea@agri.searca.org) or fax (+63-49 536-2283).