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| Instructions Please answer each question clearly and completely. Type or print in ink. Read carefully and follow all directions.  Please tick appropriate boxes. | | | **Promoting Health through Green Infrastructure: a Malaysia-UK SCHEMA Workshop**  **Application Form** | |
| 1. Name | |  | | |
| 2. Organisation(s) | | | | |
| 3. Office telephone no. | 4. Office fax no. | | | 5. Contact e-mail address    6. Cell-phone no. |
| 7. In what sector(s) are you currently active (tick all that apply)?  Academia  Business  Government  Non-Government Organisation  Other (please state) \_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| 8. In what sector(s) have you previously worked (tick all that apply)?:  Academia  Business  Government  Non-Government Organisation  Other (please state) \_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| 9. In which of the following discipline(s) do you have formal training or significant work experience (tick all that apply)?:  Architecture  Community-Organising  Engineering  Environment  Research  Policy  Public Health  Town-Planning  Other (please state) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |
| 10. Please explain why you are interested in participating in this workshop (150 words or less).    11. Please describe an aspect of your research or practice that relates to the core themes of this workshop (150 words or less).    12. Please tell us how you hope this workshop will contribute to your personal and professional development (150 words or less) | | | | |
| 13. If I am not selected as a participant, I would still like to receive news on other SCHEMA activities. Yes  No | | | | |
| 14. I understand that if I am selected as a participant, I will be expected to participate for the full duration of the workshop and to complete pre- and post-workshop surveys, including up to six months later to assess workshop effectiveness. I also understand that I may be asked to prepare short presentations and/or case studies for the workshop.   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | Date: |  |  |  |  | Signature: |  | | |  | (dd/mm/yyyy) |  |  |  |  |  |  | | | | | |

\* Please attach a CV of no longer than 2 pages, and minimum font-size 11 together with this form.

Return the filled form and attached CV to Jessie Cheah at [iigh-training@unu.edu](mailto:iigh-training@unu.edu).