REGISTRATION FORM

ACI - DNA Assistance Program
"Terminal Operations"
Incheon, ROK | 8-12 July 2013

Please fill in **one registration form per participant** and return it by **14 June 2013** by mail to: DNA@aci.aero or by fax (+1 514 373 1201). **Warning: both pages** of the registration form must be signed by the applicant **and** countersigned by the airport's Director so as to be processed. Participants are required to pay for their plane tickets, the necessary visas, and sickness and accident insurance.

PERSONAL DETAILS

Mr. ☐ / Ms ☐ / First name: …….....……..…. Last name: …….....

Business title: …….....

Department: ……

Airport: …….....……..... Country: ……....……..

Direct tel.: ……..…. Direct fax: …….....

Email: ……..…. Date of Birth:……..

TRAVEL

Arrival in ICN: date: ……time: …… flight: …….

Departure from ICN: date: ……time: …… flight: …….

Passport Number:……. Valid Until:……

VISA

☐ I don't need a visa ☐ **I need a visa** and I submitted my application to: ……....

Place and date : ……	APPROVED by (name of Director) : ……
Applicant's signature :	**Director's signature:**

REGISTRATION FORM (continued)

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ADDITIONAL INFORMATION

Use additional blank sheets if necessary

Applicant's education and previous professional experiences:

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Applicant's current tasks and responsibilities:

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Applicant's future career plan:

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Overall objectives to be reached through the applicant's attendance to the training seminar:

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Place and date : ……	APPROVED by (name of Director) : ……
Applicant's signature :	**Director's signature:**

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