







Course Title:	Distance/E-learning Cert Humanitarian and Disast Leadership(HDRL)			
Venue:	On line (e-learning)	Photo	1	
Application Date:	DD MM YYYY			
Please return the comple or josuret@musph.ac.ug	eted form to MakSPH –SLDRP via	maksph.sldrp@gma	<u>il.com</u>	
1. FULL NAME (to be us	sed in the course certificate)		2. TITLE	
First Name	Middle Name Last Name [] MR [] MS			
(full as to appear on the cour	[] MRS [] Others, specify			
3. NATIONALITY 4. I	PASSPORT	5. GENDER	6. DATE OF BIRTH 6	. AGE
	ssport Number. ssport Expiry:	[] female [] male	[dd.mm.yy]	
7. ORGANIZATION INF	FORMATION		8. CONTACT INFO (Wo	ork)
Position/Title:			Tel:	
Organization Name:			Fax:	
Organization Address:			Mobile: Email:	
	Country:			
9. HOME ADDRESS		10. CC	ONTACT INFO (Persona	l)
		Tel:		
		Email:	:	
11. ENGLISH LANGUA Note: proficiency in Engli			12. ARE YOU FAMILIA THE USE OF PERSO COMPUTER?	
READ E G F	WRITE E G F	SPEAK E G F	[]Yes []No	









13. DO YOU HAVE ACESS TO REGULAR INTERNET IN ORDER TO COMPLETE THIS COURSE?

[] Yes	0		
14. EDUCATION			
Start with the most recent in	stitution attended.		
Institution	Years attended	Major field of study	Degree
15.HAVE YOU EVER TAP Please describe	(EN AN E-LEARNING /ON	LINE COURSE	
			_
16. EMPLOYMENT			
Start with the most recent in	stitution employed.		
Position/Title	Organization	Period (from- to)	Responsibilities
17. MEMBERSHIP TO PR	OFESSIONAL SOCIETIES	5*	
40 OWE A DRIFT DECO	SIDTION OF VOLID DACT	AND DESCENT INVOLVEM	
	RIPTION OF YOUR PAST MANAGEMENT-RELATED	AND PRESENT INVOLVEM ORESPONSIBILITIES*	ENT IN HUMANITAKIAN









19. SPECIAL INTERESTS IN THE FIELD OF HUMANITARIAN OR DISASTER RISK MANAGEMENT*
20. PREVIOUS COURSE(s) ON HUMANITARIAN OR DISASTER RISK MANAGEMENT AND RELATED SUBJECTS ATTENDED*
International (give name of course(s), duration and dates)
In your country (give name of course(s), duration and dates)
21. PREVIOUS ATTENDANCE AT INTERNATIONAL WORKSHOPS AND TRAINING COURSES*
22. DESCRIBE THE PRACTICAL USE YOU WILL MAKE OF THIS COURSE IN RELATION TO THE RESPONSIBILITY YOU EXPECT TO ASSUME*









23. ACCESS TO COURSE INFORMATION							
How did you hear about the course?							
MakSPH [] FACEBOOK [] Twitter [] Email [] Colleagues []Watsapp [] Other website (please specify) [] Conference/Workshop (please specify) [] Other (please specify)							
Do you have any suggestions on how the course in	offormation might be more widely disseminated?						
24. DECLARATION							
I certify that the above statements are true and accu I committee to fully participate in the online learning	, ,						
SIGNATURE OF APPLICANT	DATE						