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**REGISTRATION FORM**

**Environmental sustainability strategies**

**November, 20- 23, 2024**

**Addis- Ethiopia**

Name of Candidate: ...................................................................................................................................................

Year of Attendance: ....................................................................................................................................................

Sex: Male 🞎 Female 🞎

Date of Birth: ...............................................................................................................................................................

Mailing Address (Business): .........................................................................................................................................

Country: ...............................................City: ....................................Street: ................................................................

P.O.Box: .......................................................................................................................................................................

Tel :.......................................................(office), ..............................................(cell/mobile) ….………………………………..

Fax: .............................................................................................................................................................................

Email: ....................................................(office) ...................................................(personal) …………………………………..

Name of Institution: ...................................................................................................................................................

Present Position: ........................................................................................................................................................

Number of Years in this Position: ...............................................................................................................................

Main Responsibilities: .................................................................................................................................................

Number of Years in Microfinance: ..............................................................................................................................

Academic Qualification: ..............................................................................................................................................

Year of Graduation: ……………………………………………………………………………………………………………..………………..………………

Area of Study: ………………………………………………………………………………………………………………..………………………………………

Language Proficiency: (Fluent in English 🞎 Yes 🞎 No)

Computer Literate 🞎 Yes 🞎 No

Signature: ............................................................... Date: .........................................................................................

Authorized by (Name): ......................................................... Position: .....................................................................

Tel: .......................................................................Email: ...........................................................................................

Signature: .............................................................. Date: ...........................................................................................