

EXERCISE AND MANAGEMENT OF COPYRIGHT AND RELATED RIGHT

This is an application form for the participation in a training program organized jointly by the World Intellectual Property Organization (WIPO) and the Norwegian Copyright Development Association (NORCODE).

The training will be held in Oslo, Norway, from June 8 to 19, 2015, and will be followed-up by a training session of one week in November 2015, in a developing country to be confirmed.

A. REQUIRMENTS FOR SELECTION	
Criteria	<p>Essential:</p> <ul style="list-style-type: none"> - Practical experience of working in the area of copyright and related rights. - Fluency in the English language. - To have succesfully completed the WIPO Distance Learning (DL) 501 Course prior to the commencement of the training* <p>Desired:</p> <ul style="list-style-type: none"> - Experience of working in a senior position within a Collective Management Organization and/or a National Copyright Office with a direct interest or involvement in collective management. - A degree or diploma (or equivalent) in a relevant subject area (e.g. law, business, administration etc.,). <p>This application should be submitted to Mr. Peter Ford, Copyright Infrastructure Division, Culture and Creative Industries Sector, WIPO, by February 15, 2015, by email: peter.ford@wipo.int, direct telephone No.: +(41 22) 338 80 89</p> <p><i>* Whilst applicants are invited to apply for the training course without having completed the WIPO Distance Learning 501 Course, which provides an introduction to collective management. Applicants who have not successfully completed the course by the date of the training will not be allowed to participate. For more details on how to enroll on the WIPO Distance Learning Course, please contact Mr. Peter Ford at the above contact details. Please note that only successful candidates will be contacted.</i></p>

B. PERSONAL DETAILS

Name	First Name: Family name:.....
Gender/Date of birth	<input type="checkbox"/> Female <input type="checkbox"/> Male ... / ... / (DD/MM/YY)
Nationality
Passport Type	Number:..... Date of Expiry: ... / ... / (DD/MM/YY) <input type="checkbox"/> Ordinary <input type="checkbox"/> Official <input type="checkbox"/> Diplomatic (please check appropriate box)
Private address and contact details	Full address: Telephone: E-mail:

C. EMPLOYMENT DETAILS

Current position (official job title):	
Division/Department:	
Please check appropriate box	<input type="checkbox"/> Intellectual (Industrial) Property Office <input type="checkbox"/> Collective Management Organization (CMO) <input type="checkbox"/> Ministry/Department in Government (including Enforcement Office) <input type="checkbox"/> Research & Development Institution <input type="checkbox"/> Non-Governmental Organization (NGO) <input type="checkbox"/> Other (please specify).....

Employer (Organization/NGO/ Government body)	Name: Full address: Telephone :..... E-mail:
Brief description of duties in current position
<p><u>Please complete only if relevant</u></p> Previous position (official job title) Division/Department:	
Please check appropriate box	<input type="checkbox"/> Intellectual (Industrial) Property Office <input type="checkbox"/> Collective Management Organization (CMO) <input type="checkbox"/> Ministry/Department in Government (including Enforcement Office) <input type="checkbox"/> Research & Development Institution <input type="checkbox"/> Non-Governmental Organization (NGO) <input type="checkbox"/> Other (please specify).....
Previous employer (Organization/NGO/ Government body)	Name ONLY:

Brief description of duties in previous position
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PREVIOUS COURSES/TRAININGS ATTENDED:

Please list **ALL** the previous relevant training and courses (such as those offered by WIPO, WIPO Academy, SIDA, NORCODE, Governmental or Non-Governmental Institutions) that you have participated in over the **past 5 years**:

- 1.....
- 2.....
- 3.....
- 4.....
- 5.....

(Please attach additional sheet, if necessary)

MOTIVATION FOR APPLICATION:

Please briefly state your motivation for applying to this training course, including your main field of interest within the training and how you hope to benefit from it.

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D. ENGLISH LANGUAGE PROFICIENCY

ENGLISH USAGE: (please check appropriate box)

- English is my mother tongue
- English is the official language at my work place

In cases where English is neither your mother tongue nor the official language at your work place, please attach a certificate of English proficiency obtained from an academic institution where you have undergone an English language course.

Please note that a high-level of English will be required to participate in the training, as the training will include intensive and in-depth discussions about collective management policy and practice.

CERTIFICATION BY APPLICANT:

I certify that the information provided above is true, complete and correct to the best of my knowledge and understanding. If selected as a participant, I will comply with all «essential» requirements for selection stated under A., above.

Signature (of applicant):

Date: .../ ... /..... (DD/MM/YY)