



DELEGATE APPLICATION FORM 2020

PERSONAL DETAILS

NAME

EMAIL

COUNTRY OF BIRTH

DATE OF BIRTH

DIET REQUIREMENT

EMERGENCY CONTACT NAME

FAMILY NAME

GENDER Male Female

NATIONALITY

AGE

CELL PHONE NUMBERS

HEIGHT IN CM

SIZE FOR T-SHIRT

EMERGENCY CONTACT NUMBER

(Click on the box and insert a clear background photo)

IMPORTANT DETAILS

Please write your name in **BLOCK LETTERS** in this section. Information entered will be transferred to your Conference Badge and Certificate. There will be an administrative fee of USD20.00/- if you require us to replace your photograph on the Conference Badge or to amend your Name on the Certificate. Please attach a recent photo with a clear background together with this application.

NAME ON CONFERENCE BADGE (Not more than 15 characters)

NAME ON CERTIFICATE

EDUCATIONAL LEVEL

CURRENTLY ENROLLED AS

Undergraduate (BA, BSC, etc.)

Graduate (MA, MSC, etc.)

Doctoral (PHD, etc.)

YEAR OF STUDY

1st year

2nd year

3rd year and above

MAJOR FIELD OF STUDY

SECONDARY FIELD OF STUDY (If applicable)

UNIVERSITY

FACULTY

DEFINE POSITIVE SOCIAL CHANGE IN YOUR OWN WORDS



WHAT DOES LEADERSHIP MEANS TO YOU?



WHAT ARE THE REASONS FOR YOUR INTEREST TO BE A DELEGATE?



Please email completed form to USLS@humanitarianaffairs.org