Institute of Disaster Mitigation for Urban Cultural Heritage, Ritsumeikan University

**UNESCO Chair Programme on Cultural Heritage and Risk Management,**

**International Training Course (ITC)**

**on Disaster Risk Management of Cultural Heritage 2024**

**APPLICATION FORM**

***Please complete this form in full, by computer.***

1. **APPLICANT**

|  |  |  |
| --- | --- | --- |
| First Name | Family Name | Photograph |
| Middle Name | |
| Date of Birth: D/M/Y | Age |
| Nationality | Place of Birth |
| Expertise  ( ) Cultural Heritage Field  ( ) Disaster Management  or Related Field | Gender |
| In which region is your country located? (please refer to <http://www.mofa.go.jp/region/index.html>) | | |
| Please indicate the main disaster risks in your area. (ex; earthquake and fire) | | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Professional Status:**  **( )** University Professor/Lecturer  ( ) International Organization　 ( ) National authority　 ( ) Local authority  ( ) Professional institution of national relevance　 ( ) Urban Planner　 ( ) Doctoral Scholars/Students  ( ) Private firm/Individual Professional ( ) NPO/NGOs ( ) Others ( ) | | | |
| **Affiliation (Name of University, Authority, Institute or Company etc):**  **Present Position:**  **Web Site:** (If available) | | | |
| Office Address | | Postal Code: | Country: |
| Office Phone No. (+ Country Code) | Office Fax No. | | |
| Home Address | | Postal Code: | Country: |
| Home Phone No. (+ Country Code) | Home Fax No. | Mobile (Cell) Phone No. | |
| Which is a preferred contact address?  ( ) Office ( ) Home | | | |
| Email Address  Preferred:  Alternatives: | | | |

**EDUCATIONAL BACKGROUND**

Latest Academic Qualifications

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name of Institution  and Country | College, Department | Duration  (D/M/Y-D/M/Y) | Degree Obtained |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Relevant Professional Courses

|  |  |  |
| --- | --- | --- |
| Full Name of Course, Institution and Country | Duration (D/M/Y-D/M/Y) | Certification Obtained |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **ENGLISH LANGUAGE ABILITY**

Please rate your language proficiency from Excellent to Poor

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Excellent | Good | Fair | Poor |
| Spoken |  |  |  |  |
| Understanding |  |  |  |  |
| Written |  |  |  |  |

1. **PROFESSIONAL ACTIVITIES**

Describe your current responsibilities and professional activities

|  |
| --- |
|  |

|  |  |  |
| --- | --- | --- |
| Relevant Previous Activities | Dates (D/M/Y-D/M/Y) | Responsibilities |
|  |  |  |
|  |  |  |
|  |  |  |

Professional Experience

( ) Less than 2 years experience in the cultural heritage conservation or disaster risk management field

( ) 3 to 4 years experience in the cultural heritage conservation or disaster risk management field

( ) 5-15 years experience in the cultural heritage conservation or disaster risk management field

( ) More than 15 years experience in the cultural heritage conservation or disaster risk management field

1. **The Cultural Heritage Site/Museum for which a Disaster Risk Management Plan**

**will be formulated:**

|  |
| --- |
| **Name of the site/museum:** |

Is this a World Heritage Site?

( ) Yes ( ) No

If not, what is the status of the site/museum?

( ) Tentative List of World Heritage　( ) Nationally Protected Site　( ) Locally Protected Site

( ) Unprotected Site

What is the type of cultural heritage selected by you?

( ) Single Monument 　( ) Group of Buildings or Ensemble 　( ) Historic City or Urban Area

( ) Archaeological Site　( ) Cultural Landscape　( ) Museum

( ) Any other (please specify )

Location of the site/museum

Latitude / Longitude ( 　　 )

\* This information is available out through Google map by pointing the cursor on the designated location.

Right click the location, and go to “Detail of the location” first. Once a green arrow appears, point the arrow with the cursor to find out the information.

Photo of the site/museum

|  |  |
| --- | --- |
|  |  |

1. **Reason for Selecting the above Cultural Heritage Site/Museum:**

|  |
| --- |
|  |

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**Short paper**

*(Around 1000 words)*

(Please write here)

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**QUESTIONNAIRE**

As part of commitment to provide high quality training course, we would appreciate your honest and constructive reactions to this training course. All comments will, of course, be treated in the strictest confidence.

**Q1. Where did you know this training course?**

|  |  |
| --- | --- |
| □A | From R-DMUCH or Ritsumeikan University website |
| □B | From UNESCO website |
| □C | From ICCROM website |
| □D | From ICOMOS/ICORP website |
| □E | From ICOM website |
| □F | From PreventionWeb website |
| □G | From my colleagues or friends |
| □H | Other→ Please describe briefly. |

**Q2. What expectation do you have during this training course?**

|  |  |
| --- | --- |
| □A | I want to know techniques and policies of Disaster Risk Management for Cultural Heritage in case of Japan. |
| □B | I want to share the knowledge and experience with the other participants and resource person, and to make international network. |
| □C | Other→ Please describe briefly. |

**Q3. What plan do you have after this training course?**

|  |  |
| --- | --- |
| □A | I will share the knowledge and experience with my colleagues. |
| □B | I will organize a training based on the experience and knowledge from the training in Japan. |
| □C | I will propose the Cultural Heritage Risk Management plan. |
| □D | Other→ Please describe briefly. |

**Q4.** **Do you have any plan to apply financial support from sources such as governmental institutions or any funding agencies?**

|  |  |
| --- | --- |
| □A | My affiliated institution or a funding agency will support me. |
| □B | I will apply to some funding agencies. |
| □C | I don’t have any funding source. |