



**AIBD/ Prasar Bharati/ STI(T) Sub-Regional Workshop on
TV Post Production and Graphics
17 - 21 November 2014
New Delhi, India**

PROJECT OUTLINE

Aims

The 5-day AIBD /Prasar Bharati/ STI(T) Sub-Regional workshop on TV Post Production and Graphics is designed for broadcast engineers/technicians and video editors associated with engineering and programme department.

Objectives

At the end of the workshop participants will be able to understand:

- Basic concepts & Techniques of Non-Linear Editing
- Basic concepts & Techniques of 3 D Graphics

Profile Of Participant

- Heads of technical and programme department in television stations
- Broadcast engineers, technicians and video editors
- Ability to understand, speak and write in English fluently



ASIA-PACIFIC INSTITUTE FOR BROADCASTING DEVELOPMENT
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APPLICATION FOR PARTICIPATION IN

**AIBD/Prasar Bharati/STI(T)
Sub-Regional Workshop on TV Post Production and Graphics
17 - 21 November 2014
New Delhi, India**

Please type or use capital letters for all entries.

APPLICANT'S NAME (Please underline family name)

Please affix a
recent
Passport
photograph
here

DATE OF BIRTH

GENDER / MARITAL STATUS

- MALE / FEMALE
 - MARRIED / SINGLE
- (Delete whichever is not applicable)

FULL POSTAL ADDRESS

(A) HOME:	TEL:
	E-MAIL:
(B) OFFICE:	TEL:
	FAX:
	E-MAIL:

NAME AND ADDRESS OF PERSON TO BE NOTIFIED IN AN EMERGENCY

(Relation of that person to applicant):	Tel:

PARTICULARS OF TRAVEL DOCUMENT

PASSPORT TYPE:	PASSPORT NO:	DATE OF ISSUE:
DATE OF EXPIRY:	PLACE OF ISSUE:	

EDUCATION

(A) HIGHEST QUALIFICATION HELD/INSTITUTION/DATE:

(B) OTHER RELEVANT STUDIES (Include previous AIBD courses/seminars and other fellowships awarded):

COMPETENCE IN THE ENGLISH LANGUAGE

READ			UNDERSTAND			SPEAK			WRITE		
EXC	GOOD	FAIR	EXC	GOOD	FAIR	EXC	GOOD	FAIR	EXC	GOOD	FAIR

Number of years you have studied English Please note: The training activity will be conducted in English.

PRESENT POSITION

(A) NAME AND ADDRESS OF EMPLOYER (Include department or sub-section):

E-mail: _____ Tel: _____ Fax: _____

(B) YEARS OF SERVICE: _____ FROM: _____ TO: _____

(C) TITLE OF POST: _____

(D) NUMBER OF YEARS IN PRESENT POST: _____

(E) DESCRIPTION OF YOUR FUNCTIONS AND DIRECT RESPONSIBILITIES:*

(F) PREVIOUS POSITION/EXPERIENCE (Briefly describe your professional career):*

(G) IF ACCEPTED FOR THIS TRAINING ACTIVITY, DESCRIBE THE PRACTICAL USE YOU INTEND TO MAKE OF THESE STUDIES ON YOUR RETURN HOME:*

(*Please use additional sheets if necessary.)

SPECIAL CONDITIONS FOR COLLABORATIVE ACTIVITY

The following conditions relate to the activity offered by the Asia-Pacific Institute for Broadcasting Development (AIBD).

Obligations of AIBD:

- Appropriate course materials will be provided.
- Where applicable, a Certificate of attendance at the conclusion of the training activity provided the participant has achieved eighty percent attendance.

Obligations of the applicant's Organisation:

- Provide return economy ticket, accommodation (as recommend by the organisers), daily subsistence allowance, visa fee and any airport departure taxes or travel levies and airport transfers at the location of the activity.
- Travel and Medical insurance to cover the duration of the activity. Participants and/or their organisations are strongly recommended to make such arrangements to cover travel and medical risks.
- Expenses to cover any en-route costs (accommodation, meals, taxis, excess baggage, handling charges, selection of participant etc.) in travelling to and from the activity.
- Ensuring the continuation of the participant's salary and other obligations.
- Assuring that the participant will be employed upon his/her return in a position related to the duties for which the activity was awarded.

Applicant's declaration:

- To carry out such instructions and abide by such conditions as may be stipulated from time to time by the Asia-Pacific Institute for Broadcasting Development (AIBD).
- To follow the course of study and abide by the rules and regulations of training institutions and other establishments during the activity.
- To refrain from engaging in political activities.
- To return directly to his/her home country upon completion of the activity.

I have read, understood and agree to abide by the conditions listed above.

Name of applicant:

.....

Signature of applicant: Date:.....

Endorsement by employer/official nominating authority:

The nominee's application has been examined and I nominate him/her as physically and medically fit to follow this activity. I have also read the conditions listed above, particularly those relating to the obligations of the applicant's organisation, and understand and agree to abide by these conditions.

Name of authorised official:

Designation:

Name of Organisation:

Official Stamp

Signature: Date: