

**GOVERNMENT OF INDIA**  
**MINISTRY OF EXTERNAL AFFAIRS**  
**INDIAN TECHNICAL AND ECONOMIC COOPERATION ( ITEC )**  
(Application for the courses fully funded by the Ministry of External Affairs, Government of India)

**APPLICATION FORM**

**Application Id:2021COL000052**  
**(To be submitted at the Indian Embassy: "BOGOTA")**

**Part- I**

<b>Nationality</b>	COLOMBIA	<b>Name of Course</b>	CAPACITY DEVELOPMENT ON ELECTION PLANNING
<b>Institute</b>	INDIA INTERNATIONAL INSTITUTE OF DEMOCRACY AND ELECTION MANAGEMENT	<b>Commencing</b>	From 13-12-2021 To: 17-12-2021

**1. Personal Particulars**

<b>Name:</b>	CAMILA
<b>Surname:</b>	PUENTES
<b>Email:</b>	anrodgom@gmail.com
<b>Sex:</b>	Female
<b>Marital Status:</b>	Single
<b>Date of Birth:</b>	01-11-1994

<b>ID Proof Type:</b>	IDCARD
<b>ID Proof No:</b>	123456789

<b>Official Details</b>	
<b>Address</b>	CALLE 20 # 35 - 75, BOGOTA, COLOMBIA
<b>Telephone No.</b>	57--601455684
<b>Mobile/Cell</b>	57-3115697489
<b>Fax</b>	57-601-1234567
<b>Email</b>	anrodgom@gmail.com

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**Educational Qualification(s)**

Degree / Diploma / Certificates	Year	Name of Educational Institute
LAW	2017	UNIVERSIDAD NACIONAL

**Professional Qualification(s), if any**

Professional Qualification(s)	Year	Name of Institute
COURSERA ABC	2021	UNIVERSIDAD HARVARD

**2. Details of Employment/Profession (current & previous)**

Name of Employer	Position	Year	Nature of Work
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Present Employment Category: Government

**Details of Current Employer**

Name	ICBF
Current Employer Address	CALLE 68
Current Email Id	DUMMYTEST@ICBF.GOV.CO
Current Phone Number	57-601-1234567
Current Designation	CLERK INTERNATIONAL RELATIONS
Current Work Responsibilities	Support the international relations wing
Working Since	01-12-2015

**3. Have you ever attended a course sponsored by the Government of India? No**

**3.1 If answer to 3 is yes, details of the Course (s):**

Name of Course	Institute	Year of Passing
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**4. Details of Course(s) attended, if any, outside your country: No**

**4.1 If answer to 4 is yes, details of the Course (s):**

Name of Course & Duration	Country	Year	Sponser
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**5. Description of (a) qualification/experience related to the course applied for (b) reason (s) for applying for this training course**

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Signature

Date:

Place:

Name and Designation (in block letters)