***5th Advanced Tibetan Women’s Leadership Training***

***25th – 31st December 2014***

***New Delhi***

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| --- | --- |
| First Name: |  |
| Last Name: |  |
| Email address: |  |
| Contact number: |  |
| Contact address (postal): |  |
| Occupation: |  |
| Work period: |  |
| Job description (in 3 sentences): | |
| What is your view on Women’s Empowerment? | |
| Why do you want to participate in this training? | |
| How can you assure that you will make a good participant? | |
| What are your expectations from this program? | |

Please send us a good resolution picture of yours. We will use it for your identity card. Thank you.