

**Application Form**

Risk Management Excellence in Microfinance – *virtual training*

March 28th to April 1st, 2022

**Please send this form t****o tisiana.baguet@houseoftraining.lu** **by February 28th, 2022 (in pdf and word).**

**A selection will be made by the partners based on the profiles of the candidates / size of the organisations (22 available seats).**

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| --- |
| Personal details |
| Mr / Ms / Mrs | First and LAST NAME |  |
| Date of birth |  | Nationality |  |
| Organisation |  |
| Country |  |
| Department or Unit |  |
| E-mail address |  |
| Position |  |
| Functions occupied in the last 3 years |  |
| Personal background in Risk Management |  |
| Diploma |  |
| Organisation Data |
| # Total Balance Sheet (EUR) |  |
| # Total Active Customers |  |
| # Staff |  |
| Risk Management or ALCO Committee | YES | NO |
| Risk Management or ALM Department | YES | NO |
|  If yes, # of staff employed |  |
|  If no, expected on (date) |  |

**Please, join the last available financial statement of your organisation to the application form.**

**I herewith submit my application for the virtual workshop 2022 “Risk Management Excellence in Microfinance” and confirm that I have read and understood my contractual obligations as stated in the practical details.**

Date, place and signature

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