**Training provider information form**

**Education**

1 Unless stated on your CV, please provide the exact title of your degree.

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**Experience of disaster risk management (DRM) training**

2 Please list the DRM training courses in which you have been involved either as a training provider or course developer.

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| *Training course title* | *Recipient country* | *Year*  | *Donor organization* |
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3 Please list any other DRM-related projects in which you have been involved.

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| *Project title* | *Recipient country* | *Year*  | *Donor organization* |
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**Experience of the postal sector and international organizations**

4 Please list your experience of working with postal operators, United Nations entities (including the UPU) and other intergovernmental organizations.

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| *Project title* | *Recipient country* | *Year*  | *Donor organization* |
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