**Nomination for candidates for CSO representative**

*Please complete this form in English and send it to* [***cso@unccd.int***](mailto:cso@unccd.int)*by* ***7th January 2018***

**INFORMATION OF THE CANDIDATE’S CSO**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of the organization | | | |
| Member CSO networks | | | |
| Country | | | |
| Present address | | | |
| Name of the representative | | Name of the contact person (if different) | |
| Telephone number | E-mail address | | Fax Number |

**CANDIDATE INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Name | | Surname | |
| Present address | | | |
| Telephone number(s) | E-mail address(es) | | Gender *(Please select)*  ☐ Female  ☐ Male |

|  |
| --- |
| Explain the experience of the organization related to the UNCCD (max. 300 words). |
|  |

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| --- |
| Describe the work plan how the candidate intends to carry out the responsibilities as panel member for the next two years (max. 300 words) |
|  |

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| Summary of the experience of the candidate of relevance to the UNCCD (max 300 words) |
|  |

**ADDITIONAL INFORMATION**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Knowledge of languages. What is your mother tongue? | | | | |  | | | | |
| OTHER LANGUAGES | | READ | | WRITE | | | SPEAK | | UNDERSTAND | |
|  | | Easily | Not easily | Easily | Not easily | | Fluently | Not fluently | Easily | Not easily |
| English | |  |  |  |  | |  |  |  |  |
| French | |  |  |  |  | |  |  |  |  |
| Spanish | |  |  |  |  | |  |  |  |  |