**Registration Form**

**Follow-up Workshop on Participatory Assessment of Climate and Disaster Risk (PACDR) in Year**

**Number of participants is limited. Workshop open for:**

1. People who participated in the PACDR workshop in date of first Workshop
2. People with good knowledge in Climate and Disaster Risk

|  |  |
| --- | --- |
| **Full Name of the Participant:** |  |
| **Address of the Participant:** |  |
| **E-Mail Address:** |  |
| **Sending Organisation:** |  |
| **Address of the sending organisation:** |  |
| **Professional background:** |  |
| **Position / Function of the Participant****in the Organisation:** |  |
| **Level of knowledge and experience of the participantwith regard to Climate and Disaster Risk** |  |
| **Experience of the sending Organisation onClimate and Disaster Risk** |  |
| **How does the sending organisation promote Climate and Disaster Risk?** |  |
| **Why would you like to take part in this workshop?** |  |
| **When would be a good time for a follow up workshop? Please give a range of possibilities (months/weeks)** |  |
| **Date and Signature of the participant:** |  |
| **Date and Signature of the line manager:** |  |

**Please return to:**

Name

Organization

Email: