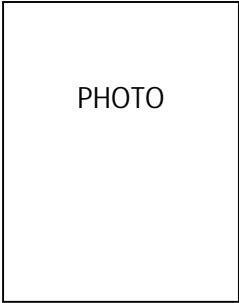


School for Ecumenical Leadership Formation (SELF) 2009
World Student Christian Federations Asia-Pacific (WSCF A-P)



October 4 (arrival)-25 (departure), 2009
Manila, Philippines

APPLICATION FORM

Name : _____

Surname *First Name* *Middle Name*

Male: Female:

Nationality: _____ Country: _____

Date of Birth: _____ Age: _____
Day/Month/Year

Present Correspondence Address: _____

Email Address: _____ Phone Number: _____

Church /Religious Affiliation:
Protestant _____ *Catholic* *Others*
(Denomination)

Passport Number: _____

Name in Passport (*If different from above*): _____

Passport Expiration Date: _____

SCM Involvement (*please tick vone*)

- Student Member
- SCM senior friend
- SCM staff
- SCM Exco/Officer
- Others

Level and Course: _____

Brief description of your SCM or Ecumenical Involvement

What is your expectation in applying for SELF 2009?

Do you have any health or dietary restrictions that you want the Local Host and Organizers to consider? If yes, please give further details.

Your Signature: _____ Date: _____

Nominated by: _____ Signature: _____

Position in SCM: _____

Endorsed by SCM Chop:

Please submit to: WSCF AP Regional Office
Unit 1-2, 18/F, 280 Portland Commercial Bldg.,
Mongkok, Kowloon, Hong Kong
Email: wscfap@netvigator.com
Tel: (852) 23852550 Fax: (852) 27823980

DEADLINE OF SUBMISSION: September 1, 2009