

APNIC Document identity				
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ISP/IXP networking workshop application form

Please clearly fill this form and submit by email to <meetings@apnic.net> by 9 July 2004.

Personal information			
Full name:	(surname, given name)		
Gender:	(male/female)		
Full postal address:	(full postal address)		
Resident of:	(current residency)		
Email:	(email address)		
Telephone:	(include international and area codes)		
Fax:	(include international and area codes)		
Work history			
Employer:	(current employer)		
Type of organisation:	(ISP/IXP/educational network/telco/etc)		
Position:	(current position)		
Current responsibilities and areas of Interest:	(current responsibilities and interests)		

Is your organisation a member of APNIC?	(Yes or no. If yes, what is the account name?)		
Other supporting information			
Participants are requested to bring their own laptop. Will you have your own laptop?	(Yes or no)		
Motivation for application:	(Motivation for your application)		
 In this section please include: relevant experiences related to the IT industry immediate benefits to you and your organisation further training in your country or the AP region 			
Are you interested in attending the APNIC 18 Open Policy Meeting from 31 August to 3 September?	(Yes or no)		