

BIO-DATA

PAGE 1

ACTION
INFO.

FOREIGN OPERATIONS ADMINISTRATION BIOGRAPHICAL DATA

On Technical Assistance Participants Visiting the U. S.

TO BE COMPLETED BY U.S.O.M.

DATE SENT

DATE RECEIVED

ATTACHMENTS

TA NO.

N.S.U. Contract

ACTIVITY TITLE

Budget and accounting

COUNTRY

Vietnam

FIELD OF ACTIVITY

Public administration

PROPOSED ARRIVAL DATE U.S.

September 1958

PROPOSED DURATION OF VISIT

12 months

INSTRUCTIONS TO PARTICIPANTS: Prepare this form on a typewriter in English. In order to prevent delay and to assist in planning your program, answer every question clearly and completely. If more space is needed, use a blank sheet of typing paper. Write your name, country, and date of birth on each sheet.

INFORMATION REGARDING PARTICIPANT

1. NAME (Last or Surname in capital letters) (First) (Middle) SEX (M or F)
Hao Nguyen Cong

2. ADDRESS (Street) (City or Town) (Country)
100/7 Ky-Dong Saigon Vietnam

3. BIRTH DATE (Day, Month, Year) 4. BIRTH PLACE (City & Country) 5. COUNTRY OF CITIZENSHIP
11.5.1921 Hanam, North VN Vietnam

6. PLEASE PROVIDE THE FOLLOWING INFORMATION FOR YOUR SPOUSE, YOUR FATHER, AND YOUR MOTHER

SPOUSE	NAME	DATE OF BIRTH	PLACE OF BIRTH
	Nguyen-Thi-Hao	1925	Chilong, Hanam, North VN
MOTHER	Va-Thi-Lieu	deceased	
FATHER	Nguyen-Van-Bang	deceased	OCCUPATION

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)
Nguyen-Thi-Hao, 100/7 Ky-Dong Saigon, wife

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)
Vietnam Embassy

9. HAVE YOU EVER BEEN IN THE U. S.? IF SO, WHEN, WHERE, FOR HOW LONG AND FOR WHAT PURPOSE?
No

10. HAVE YOU EVER TRAVELLED TO COUNTRIES OTHER THAN U. S., IF SO, WHEN, WHERE, AND FOR HOW LONG? (Include travel for educational purposes as well as pleasure)
No

11. HAVE YOU PARTICIPATED IN OR APPLIED FOR ANY OTHER U. S., U. N., OR PRIVATE TECHNICAL ASSISTANCE ACTIVITY? IF SO, SPECIFY:
No

12. LIST MEMBERSHIP IN EDUCATIONAL, PROFESSIONAL, AGRICULTURAL, LABOR OR OTHER TYPES OF ORGANIZATIONS AND SOCIETIES OF A SIMILAR NATURE. IF YOU HOLD OFFICE IN ANY OF THESE ORGANIZATIONS, SPECIFY.
No

13. OBJECT OF PROPOSED VISIT. BE SPECIFIC. INDICATE FIELD OF ENDEAVOR, CROP, PRODUCT, PROCESS, TECHNIQUE, ETC. TO BE OBSERVED, STUDIED, OR WORKED ON. E. G. MILK MARKETING, ETC.

To participate in a GU, Saigon sponsored tour to U. S. for period of 12 months.

NAME OF PARTICIPANT Nguyen-Cong-Hau	COUNTRY Vietnam	DATE OF BIRTH 11.3.1911
---	---------------------------	-----------------------------------

14. EDUCATION: INCLUDE INFORMATION CONCERNING PREPARATORY OR SECONDARY SCHOOLS, UNIVERSITIES OR OTHER INSTITUTIONS OF EQUIVALENT RANK, IF YOU ATTENDED A TRADE OR VOCATIONAL SCHOOL OR COMPLETED APPRENTICESHIP INCLUDE THAT ALSO.

SCHOOLS ATTENDED	TYPE	COURSE OF STUDY OR MAJOR	DEGREES, DIPLOMAS OR CERTIFICATES	DATE	
				FROM	TO
Seminary Ha-Thach	Secondary	General studies		1932	1937
Law University	University	Law	Certificate of the Capacity of Law	1957	1958

15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION **Administrative Secretary**
Chief clerk

PRESENT EMPLOYER'S NAME AND ADDRESS
Mr. Vu-Van-Thai, Director General of Budget and Foreign Aid, 7 Hong-Thap-Tu Saigon.

KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) **Directorate of Budget and Foreign Aid**

MACHINES OPERATED (if applicable)

NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY

DESCRIPTION OF YOUR DUTIES

Taking charge of affairs concerning the Program and planning of Foreign Aid under supervision of a Director and Chief of service.

(B) DO YOU EXPECT TO RETURN TO THIS SAME POSITION? (X) YES () NO IF NOT, HOW IS THE PROGRAM RELATED TO YOUR STUDIES AND FUTURE PLANS?

Thanks to results and experiences got from my study I hope I could successfully carry out my duties.

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION **Chief clerk**

PREVIOUS EMPLOYER'S NAME AND ADDRESS
Mr. Vu-Van-Thai, 29bis Phan-Dinh-Phung Saigon

KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) **Material Section**

MACHINES OPERATED (if applicable)

NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY **60 employees**

DESCRIPTION OF YOUR DUTIES

Taking charge of the reception and distribution supplies and equipments got from Foreign Aid.

LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH		X				X			X
OTHER French		X			X			X	

BEFORE SIGNING THIS FORM CHECK BACK OVER IT TO MAKE SURE THAT YOU HAVE ANSWERED ALL QUESTIONS CORRECTLY.

I CERTIFY that I have reviewed the statements made in this application and that they are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I further agree that if I am accepted under this program, I will follow diligently the program arranged as requested by my government and will not seek extension of the period of my program. I further agree that upon completion of my training, I will return to my country without delay and will endeavor to utilize, for the benefit of my country, the training acquired under this program.

Saigon, July 8, 1958

SIGNATURE OF PARTICIPANT **[Signature]** DATE

LANGUAGE CERTIFICATION: I CONCUR IN ITEM 15 ENTRIES FOR ENGLISH () YES () NO. IF "NO", EXPLAIN:

OFFICIAL TITLE SIGNATURE OF OFFICIAL DATE