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ATTACHMENTS

FOREIGN OPERATIONS ADMINISTRATION
BIOGRAPHICAL DATA

On Technical Assistance Participants Visiting the U. S.

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

FA NO. M.S.U. Contract	ACTIVITY TITLE Civil Police
COUNTRY Viet-Nam	FIELD OF ACTIVITY Police Administrat
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)
L A N G		Nguyen	Van	M.
2. ADDRESS (Street)		(City or Town)	(Country)	
87 Phan Thanh Gian		Saigon	Viet-Nam	
3. BIRTH DATE (Day, Month, Year)	4. BIRTH PLACE (City & Country)		5. COUNTRY OF CITIZENSHIP	
10-3-1924	Phnom-Penh, Cambodia		Viet-Nam	
6. PLEASE PROVIDE THE FOLLOWING INFORMATION FOR YOUR SPOUSE, YOUR FATHER, AND YOUR MOTHER				
SPOUSE	NAME	DATE OF BIRTH	PLACE OF BIRTH	
	Nguyen Thi RI	1926	Saigon	
MOTHER	Tran Thanh QUE	deceased		
FATHER	Nguyen Van GIAU	deceased	OCCUPATION	
7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)				
Nguyen Thi RI, 8 Tran Hung Dao, Binh Duong, Thu Dau Mot (wife)				
8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)				
NO				
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 MSU/Saigon sponsored tour to U.S. for a period of
12 months

NAME OF PARTICIPANT Nguyen Van LANG			COUNTRY Viet-Nam	DATE OF BIRTH March 10, 192	
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
Francis Garnier Sch.	Secondary	general studies	7th grade	1940	1942
Police Institute	Vocational	police	graduate	1957	

15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION Assistant Inspector		DATE EMPLOYED FROM July 15, 1957 TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS Direction of Police & Security of Saigon		APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business)
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.)	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY
DESCRIPTION OF YOUR DUTIES		

Conciliation section

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

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION Sergeant in VietNam Air Force		DATES EMPLOYED FROM 1950 TO 1956
PREVIOUS EMPLOYER'S NAME AND ADDRESS Ministry of National Defense		APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business)
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.)	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY
DESCRIPTION OF YOUR DUTIES		

16. 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.

July 3, 1958

SIGNATURE OF PARTICIPANT **Lang** DATE

LANGUAGE CERTIFICATION: I CONCUR IN ITEM 16 ENTRIES FOR ENGLISH () YES () NO. IF "NO", EXPLAIN:

OFFICIAL TITLE	SIGNATURE OF OFFICIAL	DATE
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