

BIO-DATA

ACTION
INFO.

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INTERNATIONAL COOPERATION ADMINISTRATION

BIOGRAPHICAL DATA

On Technical Cooperation Participants

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

DATE SENT

DATE RECEIVED

ATTACHMENTS

PIO/P NO.

M.S.U. Contract

ACTIVITY TITLE

Civil Police Administration

COUNTRY

Viet-Nam

FIELD OF ACTIVITY

Civil Police

PROPOSED ARRIVAL DATE U. S.

December 1, 1958

PROPOSED DURATION OF VISIT

2 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 continuation sheet Page 3.

INFORMATION REGARDING PARTICIPANT

1. NAME (Last or Surname in capital letters) (First) (Middle) SEX (M or F)
PHONG **Lam** **Quang** **M**

2. ADDRESS (Street) (City or Town) (Country)
33 bis Tran Quy Khoach **Saigon** **Viet-Nam**

3. BIRTH DATE (D Month, Year) 4. BIRTH PLACE (City & Country) 5. COUNTRY OF CITIZENSHIP
June 2, 1916 **Kien Giang - South Vietnam** **Vietnam**

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

	NAME	DATE OF BIRTH	PLACE OF BIRTH	OCCUPATION
SPOUSE	Nguyen Thi Xuyen	1921	Phuoc Tuy	
MOTHER	Tran Thi Lien	1892	Saigon	
FATHER	Lam Quang Thiep	1890	Kien Giang	

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address and Relationship)
Mrs Lam Quang Phong, Civil Guard Provincial command in Kien Giang (wife)

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address and Relationship)
Mr. Sheinbaum, Viet-Nam Project - East Lansing - Michigan -

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.

Vietnamese Students Association

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 M.S.U. Saigon sponsored tour to U.S. for a period of 2 months.

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BIOGRAPHICAL DATA ON TECHNICAL COOPERATION PARTICIPANTS

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NAME OF PARTICIPANT Lam Quang PHONG	COUNTRY Viet-Nam	DATE OF BIRTH June 2, 1916
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14. EDUCATION: INCLUDE INFORMATION CONCERNING PREPARATORY OR SECONDARY SCHOOLS, UNIVERSITIES OR OTHER INSTITUTIONS OF EQUIVALENT RANKS, 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
Taberd School	Secondary	General studies			
Saigon					
Taberd school, Saigon	Secondary	General studies	Junior high school certificate	1923	1937

15. EMPLOYMENT **Civil guard**

(A) EXACT TITLE OF YOUR PRESENT POSITION Major - Provincial Commander	DATE EMPLOYED FROM June 1955 TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS Direction General of Civil Guard	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

Provincial Commander

(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? **1956**

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION Commanding officer - District Chief	DATES EMPLOYED FROM 1955 TO
PREVIOUS EMPLOYER'S NAME AND ADDRESS Government of Viet-Nam	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

- Civil Guard Provincial Commander of Kien Giang - **Vietnam**
- Self defense Provincial Commander of Kien Giang
- Chief of district of Kien Giang (Kien An)

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>
OTHER French		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	
Cambodian		<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	

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.

SIGNATURE OF PARTICIPANT

October 28, 1958

DATE

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

OFFICIAL TITLE

SIGNATURE OF OFFICIAL

DATE