

BIO-DATA

ACTION
INTO

INTERNATIONAL COOPERATION ADMINISTRATION

BIOGRAPHICAL DATA

On Technical Cooperation Participants

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

ACTIVITY TITLE
**Improvement of Municipal
Civil Police & Surets
(VBI Municipal Police)**

DATE SENT			
DATE RECEIVED	PIO/P. NO.		
ATTACHMENTS	COUNTRY	FIELD OF ACTIVITY	
	Vietnam	Civil Police	
	PROPOSED ARRIVAL DATE U. S.	PROPOSED DURATION OF VISIT	
	September 1979	12 months 10 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)
CA	Pham	Van	M
2. ADDRESS (Street)	(City or Town)	(Country)	
6 Trinh minh The	Saigon	Vietnam	
3. BIRTH DATE (Day, Month, Year)	4. BIRTH PLACE (City & Country)	5. COUNTRY OF CITIZENSHIP	
March 26, 1925	Ha Dong	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 CA	deceased	
MOTHER			
	Pham thi KHISH	deceased	
FATHER			
	Pham dinh HUU	1901	Ha Duong North VN
			OCCUPATION
			Tradesman
7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address and Relationship)			
Pham thi BING, 6 Trinh minh The, Saigon (daughter)			
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 TRAVELED 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.

Membership of the Vietnamese-American 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 Public Administration USON/Saigon sponsored tour to U.S. for a period of 12 months.

NAME		COUNTRY		DATE OF BIRTH	
Pham Van Ca		Viet-Nam		March 26, 1955	
EDUCATION: INCLUDE INFORMATION CONCERNING PREPARATORY OR SECONDARY SCHOOLS, UNIVERSITIES OR OTHER INSTITUTIONS OF EDUCATION RANKED, 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	
Gia Long private school	Secondary	General studies	Equivalent to the Baccalaureate	FROM 1959	TO 1962
15. EMPLOYMENT					

(A) EXACT TITLE OF YOUR PRESENT POSITION Police Officer (Editor)		DATE EMPLOYED FROM 1954 TO PRESENT TIME	
PRESENT EMPLOYER'S NAME AND ADDRESS Maynh Quan Phuoc, 6 Trinh Ninh The, 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 Assuming security in the train station			
---	--	--	--

(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 Chief, Security Office of Nam Dinh province, NVN		DATES EMPLOYED FROM 1949 TO 1954	
PREVIOUS EMPLOYER'S NAME AND ADDRESS Directorate General of Police and Security		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 Assuming the regional security			
---	--	--	--

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.

Pham Van Ca

May 23, 1959

SIGNATURE OF PARTICIPANT
DATE
LANGUAGE CERTIFICATION: I CONCUR IN ITEM 16 ENTRIES FOR ENGLISH YES NO. IF "NO", EXPLAIN:

OFFICIAL TITLE
SIGNATURE OF OFFICIAL
DATE