



## INTERNATIONAL COOPERATION ADMINISTRATION

## BIOGRAPHICAL DATA

On Technical Cooperation Participants

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

DATE SENT	PIO/P NO.	ACTIVITY TITLE
DATE RECEIVED	M.S.U. Contract	Public Administration
ATTACHMENTS	COUNTRY	FIELD OF ACTIVITY
	Viet-Nam	Public Administration

PROPOSED ARRIVAL DATE U. S.  
October 1959PROPOSED 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 continuation sheet Page 3.

## INFORMATION REGARDING PARTICIPANT

1. NAME (Last or Surname in capital letters)	(First)	(Middle)	SEX (M or F)
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DUC	Le	Duy	M
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2. ADDRESS (Street)	(City or Town)	(Country)
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17 Thai Lap Thanh, Phu Nhuan	Saigon	Vietnam
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3. BIRTH DATE (Day, Month, Year)	4. BIRTH PLACE (City & Country)	5. COUNTRY OF CITIZENSHIP
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November 21, 1926	Hanoi	Vietnam
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6. PLEASE PROVIDE THE FOLLOWING INFORMATION FOR YOUR SPOUSE, YOUR FATHER, AND YOUR MOTHER			
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SPOUSE	NAME	DATE OF BIRTH	PLACE OF BIRTH
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	Nguyen Thi Hong Nga	1932	Hanoi
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MOTHER		deceased	
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FATHER		deceased	OCCUPATION
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7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address and Relationship)			
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Nguyen Thi Hong Nga, 17 Thai Lap Thanh, Phu Nhuan, Gia Dinh, Saigon (wife)
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8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address and Relationship)			
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no
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9. HAVE YOU EVER BEEN IN THE U. S.? IF SO, WHEN, WHERE, FOR HOW LONG AND FOR WHAT PURPOSE?			
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no
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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)			
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no
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11. HAVE YOU PARTICIPATED IN OR APPLIED FOR ANY OTHER U. S., U. N., OR PRIVATE TECHNICAL ASSISTANCE ACTIVITY? IF SO, SPECIFY:			
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no
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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.			
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no
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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.			
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To participate in a Public Administration Division USOM/Saigon sponsored tour to U.S. for a period of 12 months.

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## BIOGRAPHICAL DATA ON TECHNICAL COOPERATION PARTICIPANTS

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NAME OF PARTICIPANT

Le Duy DUC

COUNTRY

Vietnam

DATE OF BIRTH

Nov. 21, 1926

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
School of Nam Dinh	Secondary	General studies	Junior high school certificate	1941	1945
National Institute of Administration			Graduates from the N.I.A.	1955	1958

15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION

Assistant Chief of District

DATE EMPLOYED

FROM Aug. 1958

TO PRESENT TIME

PRESENT EMPLOYER'S NAME AND ADDRESS

APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION  
(Number of employees or volume of business)

Department of Interior, Saigon, Vietnam

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

To settle all administration, judiciary, economic, military affairs,...

(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?

Public Administration

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION

DATES EMPLOYED

Student

FROM

PREVIOUS EMPLOYER'S NAME AND ADDRESS

TO

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

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.

Signature of Participant

July 8, 1959

DATE

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

OFFICIAL TITLE

SIGNATURE OF OFFICIAL

DATE

ICA-13-91 (7-56) →

USOM FORWARD TO ICA/W

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