

# BIO-DATA

ACTION  
INFO.

## INTERNATIONAL COOPERATION ADMINISTRATION

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### 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 Budget and Finance
	COUNTRY Viet-Nam	FIELD OF ACTIVITY Public Administration
	PROPOSED ARRIVAL DATE U. S. December 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 continuation sheet Page 3.

### INFORMATION REGARDING PARTICIPANT

1. NAME (Last or Surname in capital letters) VIEN	(First) Bui	(Middle)	SEX (M or F) M
2. ADDRESS (Street) 42 Tang Bat Ho	(City or Town) Saigon	(Country) Viet-Nam	
3. BIRTH DATE (Day, Month, Year) November 6, 1928	4. BIRTH PLACE (City & Country) Hue - Center Viet-Nam	5. COUNTRY OF CITIZENSHIP Viet-Nam	
6. PLEASE PROVIDE THE FOLLOWING INFORMATION FOR YOUR SPOUSE, YOUR FATHER, AND YOUR MOTHER			
SPOUSE Che Thi Yen	NAME DATE OF BIRTH 1929	PLACE OF BIRTH Hue - Center Viet-Nam	
MOTHER Pham Thi Canh	1904		
FATHER Ung Nhien	1902		OCCUPATION Civil Servant
7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address and Relationship) CHE thi Yen 42 Tang Bat Ho, Saigon (wife)			
8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address and Relationship) Embassy of Viet-Nam			
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.

Member of N. I. A. Students Friendship 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 MSU Saigon sponsored tour to U.S. for a period of 12 months.

DS

## BIOGRAPHICAL DATA ON TECHNICAL COOPERATION PARTICIPANT'S

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NAME OF PARTICIPANT	Buu VIEN		COUNTRY	Viet-Nam	
			DATE OF BIRTH	November 6, 1928	

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
Khai Dinh School	High school	General studies	Junior high school Certificates	1945	1946
National Institute Administration	Institute	Economics and Finance	Diploma	1957	1957

## 15. EMPLOYMENT

## Provincial Administration of Long An

(A) EXACT TITLE OF YOUR PRESENT POSITION	Chief of Cabinet of Provincial Chief		DATE EMPLOYED FROM 1957 TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS	Provincial Administration of Long An		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			

Taking charge of all duties concerning the Provincial chief's cabinet political and military affairs, personnel management.

(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?

Hope to be used in NVN Services of Economy or Finance

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION	Secretary at Judiciary Services (Center Viet-Nam)		DATES EMPLOYED FROM 1947 TO 1954
PREVIOUS EMPLOYER'S NAME AND ADDRESS	Department of Justice		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

Accountant

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.

October 7, 1958

DATE

SIGNATURE OF PARTICIPANT  
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)		De