

**INTERNATIONAL COOPERATION ADMINISTRATION**

**Washington 25, D. C.**

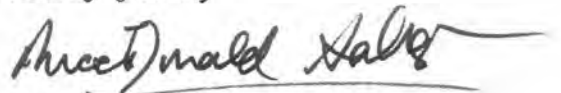
December 9, 1955

Dr. Charles C. Killingsworth  
Coordinator, Vietnam Project  
Michigan State University  
East Lansing, Michigan

Dear Dr. Killingsworth:

We have received the enclosed formal biographical statements from our Mission. These are utilized to obtain security clearance and become the basis for authorizing visa clearance. Two copies are attached for your files.

Sincerely yours,

A handwritten signature in dark ink, appearing to read "MacDonald Salter", with a long horizontal flourish extending to the right.

MacDonald Salter  
Public Administration Adviser  
for Europe and Far East

Enclosure

**BIO-DATA**

3530

**INTERNATIONAL COOPERATION**

PAGE 1

~~FOREIGN COOPERATIONS~~ ADMINISTRATION

## BIOGRAPHICAL DATA

On Technical Assistance Participants Visiting the U. S.

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

ACTION  
INFO.

VCC/Satter

DATE SENT

DATE RECEIVED

ATTACHMENTS

TA NO.

030-77-080-1-59014-

ACTIVITY TITLE

National Institute of  
Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U.S.

November 15, 1955

PROPOSED DURATION OF VISIT

Nine 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)

DIEN

Nguyen

M

2. ADDRESS (Street)

(City or Town)

(Country)

77/4 Rue Gl. De Lattre de Tassigny Saigon Vietnam

3. BIRTH DATE (Day, Month, Year)

June 2, 1922

4. BIRTH PLACE (City &amp; Country)

Center Vietnam

5. COUNTRY OF CITIZENSHIP

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 HAO

May 17, 1925

Hué, Center Vietnam

MOTHER

Cong Tang Tôn Nu Thi DAT

FATHER

Nguyen Duy PHAT

OCCUPATION

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Nguyen Thi HAO, 77/4 De Lattre, Saigon : Wife

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Vietnamese Embassy - Washington

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)

Singapore, some months, for study of English

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 M.S.U. sponsored tour to U.S.

97

NAME OF PARTICIPANT <b>Nguyen DIEN</b>	COUNTRY <b>Vietnam</b>	DATE OF BIRTH <b>2 June 1922</b>
---	---------------------------	-------------------------------------

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
<b>Khai-Dinh School</b>	<b>Secondary</b>		<b>Baccalaureate</b>	<b>1944</b>	<b>1945</b>
<b>Faculté de Droit Sg.</b>	<b>Univ.</b>	<b>Law</b>	<b>1st certificate</b>		
<b>Nat. Sch. Adm.</b>	<b>Univ.</b>	<b>Finance</b>	<b>Diploma</b>	<b>1952-</b>	<b>1955</b>

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Pho Giam Su (Administrateur Adjoint)</b>		DATE EMPLOYED FROM <b>1st August 1955</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Minister of Finances, Vietnam</b>		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.) <b>Governmental</b>	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY
DESCRIPTION OF YOUR DUTIES		

(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 <b>No</b>		DATES EMPLOYED FROM TO
PREVIOUS EMPLOYER'S NAME AND ADDRESS		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		<b>X</b>			<b>X</b>			<b>X</b>	
OTHER <b>French</b>	<b>X</b>			<b>X</b>			<b>X</b>		
<b>Latin</b>			<b>X</b>			<b>X</b>			<b>X</b>

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.

**September 28, 1955**

SIGNATURE OF PARTICIPANT \_\_\_\_\_ DATE \_\_\_\_\_

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

OFFICIAL TITLE <b>Chief, Pub. Adm. Div.</b>	SIGNATURE OF OFFICIAL <b>J.R. STARR</b>	DATE <b>4-2</b>
--	--	--------------------

# BIO-DATA

## INTERNATIONAL COOPERATION

PAGE 1

### ~~FOREIGN OPERATIONS~~ ADMINISTRATION BIOGRAPHICAL DATA

ACTION

INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

On Technical Assistance Participants Visiting the U. S.

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

TA NO.

030-77-080-  
1-59014-

ACTIVITY TITLE

National Institute of  
Public Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U.S.

November/15/55

PROPOSED DURATION OF VISIT

Nine 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)

DO

Nguyễn

Thanh

M

2. ADDRESS (Street)

(City or Town)

(Country)

10 rue Colonel Grimaud

Saigon

Vietnam

3. BIRTH DATE (Day, Month, Year)

Jan 1, 1927

4. BIRTH PLACE (City & Country)

Tourane

5. COUNTRY OF CITIZENSHIP

Vietnam

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

SPOUSE

NAME

DATE OF BIRTH

PLACE OF BIRTH

MOTHER

Huynh Thi Hien

Tourane

FATHER

dead

OCCUPATION

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Mme Huynh Thi Hien, 10 rue Colonel Grimaud, Saigon

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Michigan State University

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)

France 4 years, Italy 20 days, Switzerland 7 days, England a month  
for educational purpose

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 training in public administration at Michigan State University, East Lansing, Michigan.

43



NAME OF PARTICIPANT	<b>Nguyễn Thanh DO</b>	COUNTRY	<b>Vietnam</b>	DATE OF BIRTH	<b>Jan. 1, 1927</b>
---------------------	------------------------	---------	----------------	---------------	---------------------

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
Louis Legrand à Paris	Sec.		Bachelier en	1950	1952
Faculté de Sciences	Univ.		Sciences	1952	1953
Paris					
Faculté de Droit Paris "			Certificate of 1st	1953	1954
			year		

15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION	DATE EMPLOYED FROM <b>20 Nov. 1954</b> TO PRESENT TIME
<b>Chargé de Mission du Ministre des Finances</b>	
PRESENT EMPLOYER'S NAME AND ADDRESS	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business)
<b>Minister of Finance and Economic Affairs</b>	
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.)	MACHINES OPERATED (if applicable)
<b>Public</b>	<b>X</b>
	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY
	<b>2</b>

DESCRIPTION OF YOUR DUTIES

**Especially political affairs and special missions assigned by the Minister.**

(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?

**To be at the Economic department.**

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION	DATES EMPLOYED
<b>Secretary in railway service</b>	FROM <b>1945</b> TO <b>1950</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business)
<b>I had been in railway service as secretary</b>	
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.)	MACHINES OPERATED (if applicable)
<b>Public</b>	<b>X</b>
	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY
	<b>3</b>

DESCRIPTION OF YOUR DUTIES

**Book-keeping**

LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH		<b>X</b>				<b>X</b>			<b>X</b>
OTHER <b>French</b>	<b>X</b>			<b>X</b>			<b>X</b>		
<b>Vietnamese</b>	<b>X</b>			<b>X</b>			<b>X</b>		

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 **Nguyễn Thanh DO** DATE **17 Nov. 1955**

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

OFFICIAL TITLE <b>Chief, Public Administration</b>	SIGNATURE OF OFFICIAL	DATE
	<b>JOSEPH R. STARR</b>	<b>17 Nov. 1955</b>

# BIO-DATA

ACTION  
INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

## INTERNATIONAL COOPERATION

~~FOREIGN OPERATIONS~~

ADMINISTRATION

BIOGRAPHICAL DATA

PAGE 1

On Technical Assistance Participants Visiting the U. S.

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

TA NO.

030-77-080-

-1-59014-

COUNTRY

Vietnam

PROPOSED ARRIVAL DATE U.S.

November/15/55

ACTIVITY TITLE

National Institute of  
Public Administration

FIELD OF ACTIVITY

77

PROPOSED DURATION OF VISIT

Nine 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)  
GIAU Truong Ngoc M

2. ADDRESS (Street) (City or Town) (Country)  
4 Rue Nguyen-van-Thoai Cholon Vietnam

3. BIRTH DATE (Day, Month, Year) 4. BIRTH PLACE (City & Country) 5. COUNTRY OF CITIZENSHIP  
22 Aug. 1920 Saigon South Vietnam Vietnam

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

SPOUSE	NAME	DATE OF BIRTH	PLACE OF BIRTH
	Huynh Thi HOANG	1930	Mytho (Vietnam)
MOTHER	Dao Thi TUONG		Cholon (Vietnam)
FATHER	Truong Ngoc SANG		Tây-Ninh Dead

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)  
Dao Thi TUONG, Village Hiệp-Ninh province Tây Ninh South Vietnam (Mother)

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)  
Michigan State University

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 training in Public Administration at Michigan State University, East Lansing, Michigan.

45

NAME OF PARTICIPANT <b>Truong Ngoc GIAU</b>	COUNTRY <b>Vietnam</b>	DATE OF BIRTH <b>22 Aug. 1920</b>
--	---------------------------	--------------------------------------

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
<b>Saigon University</b>	<b>French</b>	<b>Law</b>	<b>Licencié en Droit</b>	<b>1950</b>	<b>1955</b>

15. EMPLOYMENT **Civil Servant**

(A) EXACT TITLE OF YOUR PRESENT POSITION  
**Chief of the Office at the Inspection General**

DATE EMPLOYED FROM **July 1953** TO PRESENT TIME

PRESENT EMPLOYER'S NAME AND ADDRESS  
**M. Le-van-An, Inspector General at the Presidency of Government**

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

KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) **Public**

MACHINES OPERATED (if applicable)  
**None**

NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY  
**10**

DESCRIPTION OF YOUR DUTIES  
**Aid the Inspectors to do their duties supervise the employees seek and arrange the documents**

(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?  
**I expect to teach at National Administration Institute of Vietnam, after my returning.**

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION  
**Assistant the Chief of Cholon province South Vietnam**

DATES EMPLOYED FROM **Jan.** TO **Nine months**

PREVIOUS EMPLOYER'S NAME AND ADDRESS  
**Mr. Vu-tien-HUAN, Chief of Cholon Province**

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

KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) **Provincial Administration**

MACHINES OPERATED (if applicable)  
**None**

NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY  
**30 employees**

DESCRIPTION OF YOUR DUTIES  
**Aid the Chief of Cholon province to carry out the mainly principles of administration.**

LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH			<b>X</b>			<b>X</b>			<b>X</b>
OTHER <b>French</b>	<b>X</b>			<b>X</b>			<b>X</b>		
<b>Vietnamese</b>	<b>X</b>			<b>X</b>			<b>X</b>		

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 \_\_\_\_\_ DATE **September 1, 1955**

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

OFFICIAL TITLE **Chief, Public Administration Div.** SIGNATURE OF OFFICIAL \_\_\_\_\_ DATE **46**

FOA-582 (REV. 2-54) **JOSEPH R. STARR**



# BIO-DATA

ACTION  
INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

## INTERNATIONAL COOPERATION

~~INTERNATIONAL COOPERATION~~ ADMINISTRATION  
BIOGRAPHICAL DATA

PAGE 1

On Technical Assistance Participants Visiting the U. S.

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

TA NO.

030-77-080-1-59014

ACTIVITY TITLE

National Institute of  
Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U.S.

November 15, 1955

PROPOSED DURATION OF VISIT

Nine 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)

HUAN

Hoàng

The

M.

2. ADDRESS (Street) (City or Town) (Country)

23/25 Bui-Chu (Guillerault) Saigon

Vietnam

3. BIRTH DATE (Day, Month, Year)

11 April 1933

4. BIRTH PLACE (City & Country)

Hanoi, North Vietnam

5. COUNTRY OF CITIZENSHIP

Vietnam

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

SPOUSE

NAME

DATE OF BIRTH

PLACE OF BIRTH

Tran-Ngoc-OANH

18-8-1936

Faifoo - Central Vietnam

MOTHER

Nguyen-Thi-MUI

1906

Bac-Ninh - North Vietnam

FATHER

Hoang-Van-PHU

1896

Hadong NVN. Teacher

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Hoang-Ly-VAN, 23/25 Guillerault, Saigon : Brother

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Hoang-Quoc-TRUONG, 4949 Patterson Av. Chicago 41 : Brother

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.

Association of teachers in private schools - USOM employees 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. sponsored tour to the U.S.A.

47



NAME OF PARTICIPANT <b>Hoang The HUAN</b>	COUNTRY <b>Vietnam</b>	DATE OF BIRTH <b>11-4-1933</b>
--	---------------------------	-----------------------------------

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
Dung Lac school	Elementary	French	Elem. Diploma	1940	1945
Chu-Van-An	Secondary	Languages	Diploma	1949	1951
Nguyen-Trai	Secondary	Languages	Baccalaureate	1951	1954

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Field-Assistant</b>		DATE EMPLOYED FROM <b>November 8, 1954</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Mr. M.H.B. Adler, Chief Field Service USOM, 32 Jaureguiberry, Saigon.</b>		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.) <b>Field-Service, Refugees Affairs Div.</b>	MACHINES OPERATED (if applicable) <b>Typewriter</b>	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY <b>1 typist, 1 chauffeur</b>
DESCRIPTION OF YOUR DUTIES		

Making field trips to all refugee camps in south Vietnam with Field representative. Interpreting and translating all field reports, letters, requests and other documents, Dealing with Vietnamese authorities. Office works.

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

**I shall work for the Vietnamese Government when I return from the U.S.**

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION <b>Language teacher</b>		DATES EMPLOYED FROM <b>1950</b> TO <b>1954</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>Hoang-Tuong-THUY, Nguyen-Tri-Phuong, Secondary school 37, To-Hien-Thanh street - Hanoi</b>		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.) <b>Private Secondary school</b>	MACHINES OPERATED (if applicable) <b>None</b>	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY <b>None</b>
DESCRIPTION OF YOUR DUTIES		

Teaching : French ) in the first three classes in secondary school  
English ( )  
Vietnamese ( )

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH		X			X			X	
OTHER French		X			X			X	
Vietnamese	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 11, 1955**

SIGNATURE OF PARTICIPANT	DATE
--------------------------	------

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

OFFICIAL TITLE <b>Chief, Pub. Adm. Div.</b>	SIGNATURE OF OFFICIAL <b>J.R. STARR</b>	DATE <b>48</b>
--	--	-------------------

# BIO-DATA

ACTION  
INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

## INTERNATIONAL COOPERATION

~~XXXXXXXXXXXXXXXXXXXX~~

ADMINISTRATION

BIOGRAPHICAL DATA

On Technical Assistance Participants Visiting the U. S.

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

TA NO.

030-77-080-1-52014

ACTIVITY TITLE

National Institute of  
Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U.S.

November 15, 1955

PROPOSED DURATION OF VISIT

Nine 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)
LAN	Nguyen	Quoc	M.
2. ADDRESS (Street)	(City or Town)	(Country)	
142b Ho Van Nga, 1st floor, apt.2, Saigon		Vietnam	
3. BIRTH DATE (Day, Month, Year)	4. BIRTH PLACE (City & Country)	5. COUNTRY OF CITIZENSHIP	
20 August, 1927	Hanoi	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 DEN	22-10-1928	Phu Hoa Tong, Gia-Dinh
MOTHER			
	Le Thi CHI	1904	Hanoi
FATHER			
	Nguyen Xuan HAI	13-9-1903	Hanoi
7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)			OCCUPATION is
Mr. Nguyen-xuan-HAI, 143 Gia-Long street, Saigon : Father.			working in the Post Office.
8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)			
Embassy of Vietnam, Washington (D.C.)			
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 M.S.U. sponsored Tour to U.S.A.

49

NAME OF PARTICIPANT	COUNTRY	DATE OF BIRTH
---------------------	---------	---------------

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
Faculty of Law (University of Hanoi)		Law and Economy	Licence en Droit	1950	1954

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION	Inspector in the Custom service (Vérificateur des Douanes et Régies)	DATE EMPLOYED FROM April 16th, 1954 TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS	Direction Générale des Douanes et Régies du Vietnam N° 2, Av. Ham-Nghi - 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.)	Public	MACHINES OPERATED (if applicable)
DESCRIPTION OF YOUR DUTIES		NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY

in charge of customs control at the airport or the port of Saigon

(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	Secretary in the Security Service at Hanoi	DATES EMPLOYED FROM 1-4-51 TO 21-3-52
PREVIOUS EMPLOYER'S NAME AND ADDRESS	Direction des Services de Police et de Sûreté Nationales au Nord Vietnam.	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.)	Public	MACHINES OPERATED (if applicable)
DESCRIPTION OF YOUR DUTIES		NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY

Secretary-work

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	September 22, 1955	DATE
LANGUAGE CERTIFICATION: I CONCUR IN ITEM 16 ENTRIES FOR ENGLISH <input checked="" type="checkbox"/> YES ( ) NO. IF "NO", EXPLAIN:		
OFFICIAL TITLE	SIGNATURE OF OFFICIAL	DATE



# BIO-DATA

## INTERNATIONAL COOPERATION

PAGE 1

### FOREIGN OPERATIONS ADMINISTRATION

#### BIOGRAPHICAL DATA

On Technical Assistance Participants Visiting the U. S.

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

TA NO. <b>030-77-080-1-59014</b>	ACTIVITY TITLE <b>National Institute of Administration</b>
COUNTRY <b>Vietnam</b>	FIELD OF ACTIVITY <b>77</b>
PROPOSED ARRIVAL DATE U.S. <b>November/15/55</b>	PROPOSED DURATION OF VISIT <b>Nine months</b>

ACTION

INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

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) <b>MINH</b>	(First) <b>Tran</b>	(Middle) <b>Van</b>	SEX (M or F) <b>M</b>
2. ADDRESS (Street) <b>64 Bao Ho Thoai</b>	(City or Town) <b>Saigon</b>	(Country) <b>Vietnam</b>	
3. BIRTH DATE (Day, Month, Year) <b>4-2-1928</b>	4. BIRTH PLACE (City & Country) <b>Hanoi - Nord Vietnam</b>	5. COUNTRY OF CITIZENSHIP <b>Vietnam</b>	
6. PLEASE PROVIDE THE FOLLOWING INFORMATION FOR YOUR SPOUSE, YOUR FATHER, AND YOUR MOTHER			
SPOUSE	NAME	DATE OF BIRTH	PLACE OF BIRTH
	<b>Tran thi Hue</b>	<b>1932</b>	<b>Nam Dinh - Nord Vietnam</b>
MOTHER			
	<b>Nguyen thi Ly</b>	<b>1907</b>	<b>Bac Ninh - Nord Vietnam</b>
FATHER			
	<b>Tran van Am</b>	<b>1902</b>	<b>Thai binh</b>
7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)		OCCUPATION	
<b>Tran van AM, 64 Rue Bao Ho Thoai, Saigon, Vietnam (Father)</b>		<b>N.V.N. No</b>	
8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)			
9. HAVE YOU EVER BEEN IN THE U. S.? IF SO, WHEN, WHERE, FOR HOW LONG AND FOR WHAT PURPOSE?			
<b>No</b>			
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)			
<b>NO</b>			
11. HAVE YOU PARTICIPATED IN OR APPLIED FOR ANY OTHER U. S., U. N., OR PRIVATE TECHNICAL ASSISTANCE ACTIVITY? IF SO, SPECIFY:			
<b>No</b>			
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.			
<b>No</b>			
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 training in public administration at Michigan State University

Y11

NAME OF PARTICIPANT	COUNTRY	DATE OF BIRTH
---------------------	---------	---------------

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
Hanoi University	French	Law	Licence en Droit	1950	1954
Saigon University	French	Law	Docteur en Droit	1954	1955

15. EMPLOYMENT **Barristen, Editor, Vietnam Press**

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Barristen</b>		DATE EMPLOYED FROM <b>September 1953</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Le van Mao, 138 Gia Long, Saigon, Vietnam Vietnam Press</b>		APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>10</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Law business</b>	MACHINES OPERATED (if applicable) <b>No</b>	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY <b>No</b>
DESCRIPTION OF YOUR DUTIES  <b>Advice to clients, try cases in court</b>		

(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?

**I expect to teach at National Administration institute of Vietnam, after my returning.**

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION <b>Editor</b>		DATES EMPLOYED FROM <b>Jan. 55</b> TO <b>present</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>Vietnam Presse</b>		APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>50</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Semi-official</b>	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY <b>none</b>
DESCRIPTION OF YOUR DUTIES  <b>write articles on political and legal subjects</b>		

LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH			<b>X</b>			<b>X</b>			<b>X</b>
OTHER <b>French</b>	<b>X</b>			<b>X</b>			<b>X</b>		
<b>Vietnamese</b>	<b>X</b>			<b>X</b>			<b>X</b>		

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.

**September 1st 1955**

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 \_\_\_\_\_

# BIO-DATA

ACTION  
INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

## INTERNATIONAL COOPERATION

~~FOREIGN OPERATIONS~~

ADMINISTRATION

BIOGRAPHICAL DATA

PAGE 1

On Technical Assistance Participants Visiting the U. S.

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

TA NO.

030-77-080-1-59014

COUNTRY

Vietnam

PROPOSED ARRIVAL DATE U.S.

November 15, 1955

ACTIVITY TITLE

National Institute of Administration

FIELD OF ACTIVITY

77

PROPOSED DURATION OF VISIT

Nine 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)  
NGHI Bun M

2. ADDRESS (Street) (City or Town) (Country)  
18 rue Roses Dalat Vietnam

3. BIRTH DATE (Day, Month, Year) 4. BIRTH PLACE (City & Country) 5. COUNTRY OF CITIZENSHIP  
June 27, 1927 Hue Centre V.N. Vietnam

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

SPOUSE	NAME	DATE OF BIRTH	PLACE OF BIRTH
MOTHER	Lê-thi-Câm-Vân	1931	Dai-lêc, Thua-Thiên CVN
FATHER	Trần-thi-Hà	1905	Diêm-tuong, Thua-Thiên CVN
	Ung-Tuc	1905	Hue Civil officer

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)  
Lê-quang-Thiêt, 36/45 Dumortier Saigon, - Father-in-law

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)

Yes. I have completed successfully participation in a Information Study Tour in Thailand, Malaya and Philippines in March 1954 (technical assistance project U.S.O.M.)

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 M.S.U. sponsored tour to U.S.

413



NAME OF PARTICIPANT <b>Buu-Nghi</b>	COUNTRY <b>Vietnam</b>	DATE OF BIRTH <b>June 27, 1927</b>
--	---------------------------	---------------------------------------

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
Public School in Hue	Secondary		Baccalaureat	1939	1944
Pedagogy School(CVN)	Pedagogy		Certificate	1945	1945
Propaganda School	Propaganda		Certificate	1947	1947
(Inf.Serv.of the CVN)			(Laureate)		

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Director of Radio Dalat</b>		DATE EMPLOYED FROM <b>Dec. 1954</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Minister of Information and Psychological Warfare</b>		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.) <b>Governmental</b>	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY <b>20</b>

## DESCRIPTION OF YOUR DUTIES

**Director of Radio-Dalat (Radio Station of the Government of Vietnam)**

(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 <b>Director of Information of the PMS - VN</b>		DATES EMPLOYED FROM <b>1949</b> TO <b>1955</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>Minister of Information &amp; Psychological War of the Government of Vietnam</b>		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.) <b>Governmental</b>	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY <b>30</b>

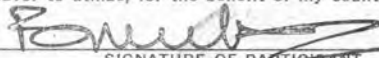
## DESCRIPTION OF YOUR DUTIES

**Director of Information of the PMS**

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH		<b>X</b>			<b>X</b>		<b>X</b>		
OTHER <b>French</b>	<b>X</b>			<b>X</b>			<b>X</b>		

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 	DATE <b>26th September 1955</b>
---	------------------------------------

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

OFFICIAL TITLE	SIGNATURE OF OFFICIAL	DATE
----------------	-----------------------	------

# BIO-DATA

## INTERNATIONAL COOPERATION

PAGE 1

## FOREIGN DEPARTMENT

## ADMINISTRATION

### BIOGRAPHICAL DATA

On Technical Assistance Participants Visiting the U. S.

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

ACTION

INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

TA NO.

030-77-080-1-59014

ACTIVITY TITLE

National Institute of Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U.S.

November 15, 1955

PROPOSED DURATION OF VISIT

Nine 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)  
 NGUYEN (First) Duong (Middle)

2. ADDRESS (Street) (City or Town) (Country)  
 110 Rue Bui-thi-Xuan Saigon Vietnam

3. BIRTH DATE (Day, Month, Year) 4. BIRTH PLACE (City & Country) 5. COUNTRY OF CITIZENSHIP  
 October 31, 1919 My-Xuyen (Soctrang) - Vietnam  
 South Vietnam Vietnam

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

SPOUSE	NAME	DATE OF BIRTH	PLACE OF BIRTH
	Huynh-thi-Bay	1917	Vinh-loi (Baclieu) VN
MOTHER	Ly-thi-Chuoc (Ty)	1896	Vinhloi (Baclieu) VN
FATHER	Duong Phat (dead)		OCCUPATION

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)  
 Huynh-thi-Bay, 110 Bui-thi-Xuan Street Saigon, wife

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)  
 The Head of Michigan State University at East Lansing - USA

9. HAVE YOU EVER BEEN IN THE U. S.? IF SO, WHEN, WHERE, FOR HOW LONG AND FOR WHAT PURPOSE?  
 I have never been in the USA

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)  
 I have travelled to Singapore and to Indonesia. I stayed at Bandung (Indonesia) for one month, from the 5th of August 1955 till the 5th of September 1955.

11. HAVE YOU PARTICIPATED IN OR APPLIED FOR ANY OTHER U. S., U. N., OR PRIVATE TECHNICAL ASSISTANCE ACTIVITY? IF SO, SPECIFY: I have participated in the Regional Training Course on Co-operation organised by the ILO/FAO in Indonesia 1955.

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 a group of translators working for the building up of an English-Vietnamese Dictionary.

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. sponsored tour to U.S.A.

4/15

NAME OF PARTICIPANT <b>Duong-Nguyen</b>	COUNTRY <b>Vietnam</b>	DATE OF BIRTH <b>Oct. 31, 1919</b>
--	---------------------------	---------------------------------------

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
School of the province of Bac Lieu	Primary School		Certificate	1927	1933
College of Cantho	Sup. Pri. School	Lit. Math. Sci.	Diploma	1933	1937
Lycée Pétrus Ky	Sec. School		Elementary B.		1937
			2 years of study	1937	1939

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Secretary in the Administration of the South VN (Direction of Economics Affairs 1st class)</b>		DATE EMPLOYED FROM <b>Jan. 1955</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Tran-van Ha, Director of Economic Affairs, 72 Nguyễn Du Street - Saigon</b>		APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>30</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Gouvernemental</b>	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY

## DESCRIPTION OF YOUR DUTIES

Distribution of controlled products and raw materials. (salt, silk, chemical, metallurgic products) - Study of the development of co-operative movement in the country under the local legislation. Research and documentation on the organization of different types of co-operative of co-operative societies.

(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 <b>Secretary of 4th class (reference to the old status)</b>		DATES EMPLOYED FROM <b>Jan 1953</b> TO <b>Dec. 1954</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>Nguyễn-van-Ba, Director of Economic Affairs 72, Rue Nguyễn Du, Saigon</b>		APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>30</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Gouvernemental</b>	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY

## DESCRIPTION OF YOUR DUTIES

Distribution of controlled products - Legislation - Documentation and Research on commercial and industrial activities.

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH		<b>X</b>			<b>X</b>			<b>X</b>	
OTHER <b>Vietnamese</b>	<b>X</b>			<b>X</b>			<b>X</b>		
<b>French</b>		<b>X</b>			<b>X</b>			<b>X</b>	

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	<b>September 22, 1955.</b>
LANGUAGE CERTIFICATION: I CONCUR IN ITEM 16 ENTRIES FOR ENGLISH <input checked="" type="checkbox"/> YES ( ) NO. IF "NO", EXPLAIN:	DATE

OFFICIAL TITLE	SIGNATURE OF OFFICIAL	DATE
----------------	-----------------------	------



# BIO-DATA

## INTERNATIONAL COOPERATION

~~FOR OFFICIAL USE ONLY~~

ADMINISTRATION  
BIOGRAPHICAL DATA

PAGE 1

ACTION  
INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

On Technical Assistance Participants Visiting the U. S.

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

TA NO.

030-77-080-1-59014

ACTIVITY TITLE

National Institute of  
Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U.S.

November 15, 1955

PROPOSED DURATION OF VISIT

Nine 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)
THANH	Thân	Thi	F.
2. ADDRESS (Street)	(City or Town)	(Country)	
24 Cité Audouit	Saigon	Vietnam	
3. BIRTH DATE (Day, Month, Year)	4. BIRTH PLACE (City & Country)	5. COUNTRY OF CITIZENSHIP	
22 April 1931	Thanh-Hoa - Vietnam	Vietnam	
6. PLEASE PROVIDE THE FOLLOWING INFORMATION FOR YOUR SPOUSE, YOUR FATHER, AND YOUR MOTHER			
SPOUSE	NAME	DATE OF BIRTH	PLACE OF BIRTH
	Pham-Dang-SUM	1st May 1929	Hué - Vietnam
MOTHER	Phan-Thi-LANG	1904	Hué - Vietnam
FATHER	Than-Trong-KHOI	1904	Hué VN. of Agriculture
7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)			
Mr. Than-Trong-KHOI, 66 Lê-Thai-Tô - Hué : Father			
8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)			
Mrs. Tran-Van-CHUONG, Co/o Vietnam Embassy, Washington 8, D.C.: Aunt.			
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 M.S.U. sponsored tour to the U.S.A.

417

NAME OF PARTICIPANT <b>Than-Thi-THANH</b>	COUNTRY <b>Vietnam</b>	DATE OF BIRTH <b>22 April, 1931</b>
--	---------------------------	--

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
<b>Yersin, Dalat</b>	<b>Lyceum</b>	<b>Mathematics</b>	<b>Baccalaureate II</b>	<b>1950</b>	<b>1951</b>
<b>Faculty of Sciences Hanoi.</b>	<b>Univ.</b>	<b>M.P.C. (Math., Physics, Chemistry)</b>	<b>Certificate of M.P.C.</b>	<b>1951</b>	<b>1952</b>
<b>Faculty of Sciences</b>	<b>Sg. Univ.</b>	<b>Math. General</b>		<b>1952</b>	<b>1953</b>

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Administrative Assistant</b>		DATE EMPLOYED FROM <b>February 1955</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Mr. Wm.H. Coster, Jr. - Field Representative USOM Saigon.</b>		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.) <b>Field Service, USOM.</b>	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY

## DESCRIPTION OF YOUR DUTIES

**Office works - Dealing with the Vietnamese government employees. about Refugee 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?

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION <b>Accounting Clerk and Translator</b>		DATES EMPLOYED FROM <b>April 54</b> TO <b>February 55</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>Mr. John H. HACKETT, Field Representative USOM Hué.</b>		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.) <b>Field Service, USOM - Hué</b>	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY

## DESCRIPTION OF YOUR DUTIES

**Taking care of the office business  
Translating all outgoing and incoming letters from English into French and vice-versa.**

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH		<b>X</b>				<b>X</b>		<b>X</b>	
OTHER <b>French</b>		<b>X</b>			<b>X</b>			<b>X</b>	

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	<b>October 11, 1955</b> DATE
--------------------------	---------------------------------

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

OFFICIAL TITLE <b>Chief, Pub. Adm. Div.</b>	SIGNATURE OF OFFICIAL <b>J.R. STARR</b>	DATE <b>4/18</b>
--	--	---------------------

# BIO-DATA

ACTION  
INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

## INTERNATIONAL COOPERATION

~~FOREIGN OPERATIONS~~

~~WORLDWIDE OPERATIONS~~

ADMINISTRATION  
BIOGRAPHICAL DATA

PAGE 1

On Technical Assistance Participants Visiting the U. S.

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

TA NO.

030-77-080 -  
1-59014-

ACTIVITY TITLE

National Institute of  
Public Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U.S.

November/15/55

PROPOSED DURATION OF VISIT

Nine 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)

Truong

LEM

Hoang

F.

2. ADDRESS (Street)

166 Arras

(City or Town)

Saigon

(Country)

Vietnam

3. BIRTH DATE (Day, Month, Year)

November 4th 1933

4. BIRTH PLACE (City & Country)

Ben-Tre (South Vietnam)

5. COUNTRY OF CITIZENSHIP

Vietnamese

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

SPOUSE

NAME

DATE OF BIRTH

PLACE OF BIRTH

MOTHER

FATHER

OCCUPATION

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Mrs Huynh Thi HUE, Institutrice à Ben-Tre (S.V.N.) - Mother

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Michigan State University

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 training program in public administration at  
Michigan State University.

y 21



NAME OF PARTICIPANT	COUNTRY	DATE OF BIRTH
---------------------	---------	---------------

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
Bentre's School	Elementary		C.E.P.S.I.	1940	1945
Mytho's College	GL Secondary		D.E.P.S.	1946	1951
Marie Curie Lycée			B.E. Bacc. I	1951	1953
Law Faculty Univ. Hanoi				1954	1955

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Secretary</b>		DATE EMPLOYED FROM <b>1953</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Delegation of South Vietnam</b>		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.) <b>Public</b>	MACHINES OPERATED (if applicable) <b>Typewriter</b>	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY <b>None</b>

## DESCRIPTION OF YOUR DUTIES

**I am the Executive Secretary of the Director of Personnel in S.V.N.**

(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 <b>None</b>		DATES EMPLOYED FROM TO
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>None</b>		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

**None**

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH		<b>X</b>			<b>X</b>			<b>X</b>	
OTHER <b>French &amp; VN.</b>	<b>X X</b>			<b>X X</b>			<b>X X</b>		
<b>Spanish</b>			<b>X</b>						

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 \_\_\_\_\_ DATE \_\_\_\_\_

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

OFFICIAL TITLE \_\_\_\_\_ SIGNATURE OF OFFICIAL \_\_\_\_\_ DATE \_\_\_\_\_

*Y22*

# BIO-DATA

## INTERNATIONAL COOPERATION

~~EXPERIENCE COORDINATION~~

ADMINISTRATION

BIOGRAPHICAL DATA

PAGE 1

On Technical Assistance Participants Visiting the U. S.

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

ACTION

INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

TA NO.

030-77-080-1-59014

ACTIVITY TITLE

National Institute of Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U. S.

November 15, 1955

PROPOSED DURATION OF VISIT

Nine 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)

TU

Nguyen

Si

M

2. ADDRESS (Street)

(City or Town)

(Country)

Bobillot Street, Lane 1, Nr. 7, Hué (Central VN)

Vietnam

3. BIRTH DATE (Day, Month, Year)

Sept. 15, 1918

4. BIRTH PLACE (City & Country)

Huá Vietnam

5. COUNTRY OF CITIZENSHIP

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 Hien

Feb. 11, 1923

Huá, Vietnam

MOTHER

Dô thi Giu

1888

Huá, Vietnam

FATHER

Nguyen Long

3rd. June 1889 Huá VN

OCCUPATION

Civil

Servant in retirement.

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Mr. Nguyen Long, 127, Hang Be, Hué, Vietnam - Father

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

None

9. HAVE YOU EVER BEEN IN THE U. S.? IF SO, WHEN, WHERE, FOR HOW LONG AND FOR WHAT PURPOSE?

Never

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)

I have been in Thailand from 1946 to 1952 as war refugee.

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 M.S.U. sponsored Tour to U.S.A.

Y 23

NAME OF PARTICIPANT <b>Nguyễn-si-Tu</b>	COUNTRY <b>Vietnam</b>	DATE OF BIRTH <b>Sept. 15, 1918</b>
--	---------------------------	--

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
<b>Ecole Paul Bert Hué Secondary School</b>			<b>Brevet Elementaire (H.S. Diploma)</b>	<b>1932</b>	<b>1936</b>
<b>Ecole Pellerin Hué Primary</b>			<b>Primary Certificate</b>	<b>1927</b>	<b>1931</b>

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Secretary</b>	DATE EMPLOYED FROM <b>Feb. 1953</b> TO <b>Sept. 1955</b>
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Administration régionale du Centre Vietnam (Service du Personnel) à Hué.</b>	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.) <b>Public</b>	MACHINES OPERATED (if applicable) <b>Typewriter</b>
NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY	

## DESCRIPTION OF YOUR DUTIES

**Registration filing and typing of correspondence.**

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

**I would like to seek position in business specially in international trading such as import of manufactured products and export of rice, timber rubber etc... for to work in a banking organization.**

## (C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION

<b>Office Clerk</b>	DATES EMPLOYED FROM <b>1950</b> TO <b>1952</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>N.V. Internationale Credit en HandelsVereniging "Rotterdam" (The Rotterdam Trading company) (A Dutch Bangkok Office, P.O. Box 209, Bangkok - Siam)</b>	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>100 office clerks, shipping clerks etc...</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Import and export</b>	MACHINES OPERATED (if applicable) <b>Typewriter</b>
NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY	

## DESCRIPTION OF YOUR DUTIES

**Decoding cables with Acme and Bentley's codes Filing and typing correspondence in English, checking and sending shipping documents to the banks constitution of claim's documents for Lloyd's Cos. Insurance Cos. etc...**

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH			<b>X</b>			<b>X</b>		<b>X</b>	
OTHER <b>Siamese</b>					<b>X</b>			<b>X</b>	
<b>Laos</b>					<b>X</b>			<b>X</b>	

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 on file USOM/Saigon"**

**Sept. 22, 1955**

SIGNATURE OF PARTICIPANT

DATE

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

OFFICIAL TITLE	SIGNATURE OF OFFICIAL	DATE
----------------	-----------------------	------

724



# BIO-DATA

## INTERNATIONAL COOPERATION

PAGE 1

~~EXERCISE COOPERATION~~

ADMINISTRATION

BIOGRAPHICAL DATA

On Technical Assistance Participants Visiting the U. S.

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

ACTION

INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

TA NO.

030-77-080-1-59014

ACTIVITY TITLE

National Institute of Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U.S.

November 15, 1955

PROPOSED DURATION OF VISIT

Nine 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)

TUAN

(First)

DS

(Middle)

Lênh

SEX (M or F)

M.

2. ADDRESS (Street)

13/3 Redemptoristes

(City or Town)

Saigon

(Country)

South Vietnam

3. BIRTH DATE (Day, Month, Year)

7 July 1930

4. BIRTH PLACE (City & Country)

Thuong-Dinh village NVN

5. COUNTRY OF CITIZENSHIP

Vietnam

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

SPOUSE

NAME

DATE OF BIRTH

PLACE OF BIRTH

MOTHER

Nguyen-Thi-TRAM

1892

Ha-Dinh village - N.V.N.

FATHER

Do-Yen-BINH (deceased)

1893

Thuong-Dinh

D.S. Hanoi

OCCUPATION

Farmer

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Mrs. Pham-gia-TRINH, 13/3 Redemptoristes Saigon, S.V.N. : Sister

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?

Never

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)

Never

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 M.S.U. sponsored tour to the U.S.A.

425

NAME OF PARTICIPANT <b>Do-Lenh-TUAN</b>	COUNTRY <b>Vietnam</b>	DATE OF BIRTH <b>7 July 1930</b>
--	---------------------------	-------------------------------------

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
<b>Lycée Chu-Van-An</b> <b>Hanoi.</b>	<b>Secondary</b>	<b>Philosophy</b>	<b>Baccalaureate</b>	<b>1948</b>	<b>1950</b>
<b>Faculty of Law</b>	<b>Univ.</b>	<b>Letter</b> <b>Law</b>	<b>Philo-Letter</b> <b>Licence of Law</b>	<b>1950</b>	<b>1954</b>

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Translator and Interpreter</b>	DATE EMPLOYED FROM <b>February 1955</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Dr. H.A. Poindexter, 32 Jaureguiberry, USOM/Saigon</b>	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>USOM/Saigon</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Foundry, Milk Marketing,</b>	MACHINES OPERATED (if applicable) <b>No</b>
	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY <b>No</b>

## DESCRIPTION OF YOUR DUTIES

**Interpreter for all American personnels  
Translate reports, documents, papers, for the Public  
Health Division.**

(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?

**I intend to work for the Vietnamese Ministry of Foreign Affairs**

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION <b>Teacher</b>	DATES EMPLOYED FROM <b>1-1954</b> TO <b>2-1955</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>Mr. Pham-Van-NAM - Headmaster</b> <b>College Quang-Trung, Dalat, P.M.S.</b>	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>Education</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Education</b>	MACHINES OPERATED (if applicable) <b>No</b>
	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY <b>No</b>

## DESCRIPTION OF YOUR DUTIES

**I taught Vietnamese literature, French, English languages, History**

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH		<b>X</b>			<b>X</b>			<b>X</b>	
OTHER <b>French</b>		<b>X</b>			<b>X</b>			<b>X</b>	

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 **Do-Lenh-TUAN** **October 11, 1955** DATE

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

OFFICIAL TITLE **Chief,**  
**Pub. Adm. Div.** SIGNATURE OF OFFICIAL **J.R. STARR** DATE **Y-26**

Ref: ICA ltr 12/9/55

Attached forms cover participants  
who did not arrive with  
group 11/53.

May possibly come at later  
date.



# BIO-DATA

## INTERNATIONAL COOPERATION

PAGE 1

FOREIGN OPERATIONS ADMINISTRATION  
BIOGRAPHICAL DATA

ACTION

INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

On Technical Assistance Participants Visiting the U. S.

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

TA NO.

ACTIVITY TITLE

030-77-080-1-590112

National Institute of Administration

COUNTRY

FIELD OF ACTIVITY

Vietnam

77

PROPOSED ARRIVAL DATE U.S.

PROPOSED DURATION OF VISIT

November/15/55

Nine 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)

MINH Tran Van M

2. ADDRESS (Street) (City or Town) (Country)

64 Bao Ho Thoai Saigon Vietnam

3. BIRTH DATE (Day, Month, Year) 4. BIRTH PLACE (City & Country) 5. COUNTRY OF CITIZENSHIP

4-2-1928 Hanoi - Nord Vietnam Vietnam

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

SPOUSE NAME DATE OF BIRTH PLACE OF BIRTH

Tran thi Hue 1932 Nam Dinh - Nord Vietnam

MOTHER

Nguyen thi Ly 1907 Bac Ninh - Nord Vietnam

FATHER

Tran van Am 1902 Thai binh No

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Tran van AM, 64 Rue Bao Ho Thoai, Saigon, Vietnam (Father)

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

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:

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.

French

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 training in public administration at Michigan State University

y11

NAME OF PARTICIPANT	COUNTRY	DATE OF BIRTH
---------------------	---------	---------------

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
Hanoi University	French	Law	Licence en Droit	1950	1954
Saigon University	French	Law	Docteur en Droit	1954	1955

15. EMPLOYMENT **Barristen, Editor, Vietnam Press**

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Barristen</b>	DATE EMPLOYED FROM <b>September 1953</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Le van Mao, 138 Gia Long, Saigon, Vietnam Vietnam Press</b>	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>10</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Law business</b>	MACHINES OPERATED (if applicable) <b>No</b>
NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY <b>No</b>	

DESCRIPTION OF YOUR DUTIES

**Advice to clients, try cases in court**

(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?

**I expect to teach at National Administration institute of Vietnam, after my returning.**

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION <b>Editor</b>	DATES EMPLOYED FROM <b>Jan. 55</b> TO <b>present</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>Vietnam Presse</b>	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>50</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Semi-official</b>	MACHINES OPERATED (if applicable)
NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY <b>none</b>	

DESCRIPTION OF YOUR DUTIES

**write articles on political and legal subjects**

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH			X			X			X
OTHER <b>French</b>	X			X			X		
<b>Vietnamese</b>	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.

**September 1st 1955**

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
----------------	-----------------------	------

*4/12*

# BIO-DATA

ACTION  
INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

## INTERNATIONAL COOPERATION

~~INTERNATIONAL COOPERATION~~

ADMINISTRATION

### BIOGRAPHICAL DATA

On Technical Assistance Participants Visiting the U. S.

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

TA NO.

030-77-080-1-59014

ACTIVITY TITLE

National Institute of Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U.S.

November 15, 1955

PROPOSED DURATION OF VISIT

Nine 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)

TU

Nguyễn

Si

M

2. ADDRESS (Street)

(City or Town)

(Country)

Bobillot Street, Lane 1, Nr. 7, Hué (Central VN)

Vietnam

3. BIRTH DATE (Day, Month, Year)

Sept. 15, 1918

4. BIRTH PLACE (City & Country)

Huá Vietnam

5. COUNTRY OF CITIZENSHIP

Vietnam

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

SPOUSE

NAME

DATE OF BIRTH

PLACE OF BIRTH

Nguyễn thi Hiền

Feb. 11, 1923

Huá, Vietnam

MOTHER

Dô thi Giu

1888

Huá, Vietnam

FATHER

Nguyễn Long

3rd. June 1889

Huá VN

OCCUPATION

Civil  
Servant in retire-  
ment.

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

Mr. Nguyễn Long, 127, Hang Be, Hué, Vietnam - Father

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)

None

9. HAVE YOU EVER BEEN IN THE U. S.? IF SO, WHEN, WHERE, FOR HOW LONG AND FOR WHAT PURPOSE?

Never

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)

I have been in Thailand from 1946 to 1952 as war refugee.

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 M.S.U. sponsored Tour to U.S.A.

Y 23



NAME OF PARTICIPANT <b>Nguyễn-si-Tu</b>	COUNTRY <b>Vietnam</b>	DATE OF BIRTH <b>Sept. 15, 1918</b>
--	---------------------------	--

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
<b>Ecole Paul Bert Hué Secondary School</b>			<b>Brevet Elementaire (H.S. Diploma)</b>	<b>1932</b>	<b>1936</b>
<b>Ecole Pellerin Hué Primary</b>			<b>Primary Certificate</b>	<b>1927</b>	<b>1931</b>

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Secretary</b>	DATE EMPLOYED FROM <b>Feb. 1953</b> TO PRESENT TIME <b>Sept. 1955</b>
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Administration régionale du Centre Vietnam (Service du Personnel) à Hué.</b>	
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Public</b>	MACHINES OPERATED (if applicable) <b>Typewriter</b>
NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY	

## DESCRIPTION OF YOUR DUTIES

**Registration filing and typing of correspondence.**

(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?

**I would like to seek position in business specially in international trading such as import of manufactured products and export of rice, timber rubber etc... for to work in a banking organization.**

## (C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION

<b>Office Clerk</b>	DATES EMPLOYED FROM <b>1950</b> TO <b>1952</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>N.V. Internationale Credit en HandelsVereniging "Rotterdam" (The Rotterdam Trading company) (A Dutch Bangkok Office, P.O. Box 209, Bangkok - Siam)</b>	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>100 office clerks, shipping clerks etc...</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Import and export</b>	MACHINES OPERATED (if applicable) <b>Typewriter</b>
NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY	

## DESCRIPTION OF YOUR DUTIES

**Decoding cables with Acme and Bentley's codes Filing and typing correspondence in English, checking and sending shipping documents to the banks constitution of claim's documents for Lloyd's Cos. Insurance Cos. etc...**

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH			<b>X</b>			<b>X</b>		<b>X</b>	
OTHER <b>Siamese</b>					<b>X</b>			<b>X</b>	
<b>Laos</b>					<b>X</b>			<b>X</b>	

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 on file USOM/Saigon"**

**Sept. 22, 1955**

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
----------------	-----------------------	------

724

# BIO-DATA

ACTION

INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

## INTERNATIONAL COOPERATION

~~EXCHANGE OPERATIONS~~

ADMINISTRATION

BIOGRAPHICAL DATA

PAGE 1

On Technical Assistance Participants Visiting the U. S.

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

TA NO.

030-77-080-1-59014-

ACTIVITY TITLE

National Institute of Administration

COUNTRY

Vietnam

FIELD OF ACTIVITY

77

PROPOSED ARRIVAL DATE U.S.

November 15, 1955

PROPOSED DURATION OF VISIT

Nine 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)  
**TUAN** **D8** **Lênh** **M.**

2. ADDRESS (Street) (City or Town) (Country)  
**13/3 Redemptoristes** **Saigon** **South Vietnam**

3. BIRTH DATE (Day, Month, Year) 4. BIRTH PLACE (City & Country) 5. COUNTRY OF CITIZENSHIP  
**7 July 1930** **Thuong-Dinh village NVN** **Vietnam**

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

SPOUSE	NAME	DATE OF BIRTH	PLACE OF BIRTH
MOTHER	<b>Nguyen-Thi-TRAM</b>	<b>1892</b>	<b>Ha-Dinh village - N.V.N.</b>
FATHER	<b>Do-Yen-BINH (deceased)</b>	<b>1893</b>	<b>Thuong-Dinh D.S. Hanoi</b> <b>Farmer</b>

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address, and Relationship)  
**Mrs. Pham-gia-TRINH, 13/3 Redemptoristes Saigon, S.V.N. : Sister**

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?  
**Never**

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)  
**Never**

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 M.S.U. sponsored tour to the U.S.A.

425

NAME OF PARTICIPANT <b>Do-Lenh-TUAN</b>	COUNTRY <b>Vietnam</b>	DATE OF BIRTH <b>7 July 1930</b>
--	---------------------------	-------------------------------------

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
<b>Lycée Chu-Van-An</b> <b>Hanoi.</b>	<b>Secondary</b>	<b>Philosophy</b>	<b>Baccalaureate</b>	<b>1948</b>	<b>1950</b>
<b>Faculty of Law</b>	<b>Univ.</b>	<b>Letter</b> <b>Law</b>	<b>Philo-Letter</b> <b>Licence of Law</b>	<b>1950</b>	<b>1954</b>

## 15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Translator and Interpreter</b>	DATE EMPLOYED FROM <b>February 1955</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>Dr. H.A. Poindexter, 32 Jaureguiberry, USOM/Saigon</b>	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>USOM/Saigon</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Foundry, Milk Marketing, Cotton Textile Mfg., etc.</b>	MACHINES OPERATED (if applicable) <b>No</b>
	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY <b>No</b>

## DESCRIPTION OF YOUR DUTIES

**Interpreter for all American personnels  
Translate reports, documents, papers, for the Public  
Health Division.**

(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?

**I intend to work for the Vietnamese Ministry of Foreign Affairs**

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION <b>Teacher</b>	DATES EMPLOYED FROM <b>1-1954</b> TO <b>2-1955</b>
PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>Mr. Pham-Van-NAM - Headmaster</b> <b>College Quang-Trung, Dalat, P.M.S.</b>	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business) <b>Education</b>
KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>Education</b>	MACHINES OPERATED (if applicable) <b>No</b>
	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY <b>No</b>

## DESCRIPTION OF YOUR DUTIES

**I taught Vietnamese literature, French, English languages, History**

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 <b>French</b>		<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 **Do-Lenh-TUAN** **October 11, 1955**

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

OFFICIAL TITLE <b>Chief, Pub. Adm. Div.</b>	SIGNATURE OF OFFICIAL <b>J.R. STARR</b>	DATE <b>y. 26</b>
--	--	----------------------

FOA-582 (REV. 2-54)