

## **NOMINATION FORM**

### **WCO Regional Customs Laboratory Professionals Programme (2024/25)**

#### *INSTRUCTIONS*

(1) *To be completed by - or under the authority of - the Head of the nominating administration, e.g. **Director General, Commissioner or equivalent official**, and returned to the Office of the Secretary General of the World Customs Organization (email : [rcl.hsclassification@wcoomd.org](mailto:rcl.hsclassification@wcoomd.org)). **Please note that the form must be signed by the Head of the nominating administration. Otherwise, the nomination will be considered invalid.***

(2) *Please complete this form in typewritten script.*

**THE CUSTOMS ADMINISTRATION OF \_\_\_\_\_**

**NOMINATES \_\_\_\_\_**

**(Nominee's current title)**

**FOR THE WCO REGIONAL CUSTOMS LABORATORY PROFESSIONALS PROGRAMME.**

**THE NOMINATING ADMINISTRATION CERTIFIES THAT THE NOMINEE :**

- i) Is a Customs officer of a Member administration which has active status at the WCO;
- ii) Has a minimum of 3 years' experience in Customs;
- iii) Has a university degree or equivalent professional qualification;
- iv) Is proficient in English;
- v) Is in good health and free from any medical condition that would impair nominee's full participation in the Programme;
- vi) Has chemical expertise; and
- vii) Has working experience in the field of scientific analysis in Customs.

**DATE AND PLACE :** \_\_\_\_\_

\_\_\_\_\_  
**Signature and seal of Head of the Administration**

**Name of signatory :** \_\_\_\_\_

**Title :** \_\_\_\_\_