|  |  |
| --- | --- |
| *Name of Nominee:* |  |
| *Country:* |  |
| *Designation:* |  |
| *Ministry:* |  |
| *Phone No.:* |  |
| *Email Address:* |  |

**Pacific BioScapes Project**

**National Marine Turtle Monitoring Coordinator - NOMINATION FORM**

*For Travel: SPREP will bear the costs of the airfare (most direct/economical route) and DSA only for the duration of trainings and workshops. All other related costs are to be borne by the participants/nominating governments (this includes but is not limited to passport, visas, travel/medical insurance (including health clearance, COVID-related medicals etc), pre-entry and upon-entry requirements by the host country).*