INTERPOL

ENROLMENT FORM

EVENT INFORMATION	
TITLE	**Criminal Intelligence Analysis Training**
DATE	**2-13 March 2020**
VENUE	**Dhaka, Bangladesh**

Please fill out the form electronically as possible. All the fields are compulsory

COUNTRY:	
PARTICIPANT'S DETAIL	
FIRST NAME	M.K.H.
MIDDLE NAME	JAHANGIR
LAST NAME	**HOSSAIN**
Name in local script (Name, middle name, last name)	**M.K.H. JAHANGIR HOSSAIN**
Sex	Male ☑ Female ☐
Date of Birth (DD/MM/YY)	**25/08/1975**
Country of Birth	BANGLADESH
City/Village	KUSHTIA, BANGLADESH
State/Province	NA
ID DOCUMENTS	
Passport Number	**OC 2161266**
National ID number	19755525709157937
EMPLOYMENT INFORMATION	
Agency type	Law Enforcement ☑ Other ☐
Complete Name of the Agency	
Ministry	**MINISTRY OF HOME AFFAIRS**
Department	**BANGLADESH POLICE**
Division	**NA**
Sub-division/Unit	**POLICE BUREAU OF INVESTIGATION (PBI)**
Duty Station Address	**PBI, JASHORE**
Official Position/Title, Rank	**ADDITIONAL SUPERINTENDENTS OF POLICE**
Are you authorized to carry a gun?	Yes ☑ No ☐
Are you authorized to arrest?	Yes ☑ No ☐
CONTACT DETAILS	
Telephone number (work)	**042171703**
Mobile number	**01775-889955**
Email	**jhossain21@gmail.com**
Skype ID (if applicable)	**NA**

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LANGUAGE	
Languages spoken	BANGLA & ENGLISH
TRAVEL DETAILS	
Copy of Passport Attached?	NA Yes ☑ No ☐
Departure City	NA
Departure and Return Dates	NA
Special Food Requirements, if any	

DISCLAIMERS	
• Group pictures or individual pictures taken during the event may be published in the INTERPOL media platforms such as news or social media as well as reports and presentations. Do you consent that your picture can be used in those materials?	Yes ☐ No ☐

- In line with the INTERPOL Policy on Mission and Travel, when transport, accommodation and meal costs are paid for directly by the organization, no additional subsistence allowance will be paid
- Participants will be responsible for covering costs for any additional days requested outside the duration of the event

APPENDIX 4 TO THE STAFF INSTRUCTION NO 2014.09 (Staff instruction disposition: 12.2)

Subject: Insurance disclaimer for external participants

The Organization reminds external participants that it is their responsibility to obtain any necessary visas, to take out adequate travel insurance, and to follow the health and safety recommendations for the country of destination.

The Organization cannot be held liable for any damages or injuries participants may sustain themselves or cause to others during their |round-trip journey and during their stay in the country where the activity is being held (except specific cases of events and conferences).

The Organization shall not cover the participant's travel and accommodation costs if the aforementioned conditions are not met.

Date: 29/01/2020

Signature of the external participant:

Please email the filled out and signed form along with a copy of your passport to INTERPOL Environmental Security at environmentalcrime@interpol.int

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INFORMATION OF THE BEARER

Name: M K H JAHANGIR HOSSAIN
Father's Name: MD JALAL UDDIN
Mother's Name: MST TOHURA KHATUN
Spouse's Name: MST BEAUTY KHATUN
Permanent Address: MAJHPARA, JHAUDIA MAJHPARA, ISLAMIC UNIVERSITY, KUSHTIA

Emergency Contact:
Name: KAMRUL HASAN
Relationship: BROTHER
Address: MAJHPARA, JHAUDIA MAJHPARA, ISLAMIC UNIVERSITY, KUSHTIA
Telephone No: 01727804142

পাসপোর্ট নম্বর / Passport No.
OC 2161266

MD. HAFIZUR RAHMAN
ASSISTANT DIRECTOR
DIVISIONAL PASSPORT AND VISA OFFICE
GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH
KHULNA

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পাসপোর্ট
PASSPORT

গণপ্রজাতন্ত্রী বাংলাদেশ People's Republic of Bangladesh



শ্রেণী / Type	দেশ কোড / Country code
PG	BGD
পাসপোর্ট নং / Passport No.	OC2161266
বংশগত নাম / Surname	HOSSAIN
প্রদত্ত নাম / Given Name	M K H JAHANGIR
জাতীয়তা / Nationality	BANGLADESHI
ব্যক্তিগত নং / Personal No.	19755525709157937
জন্ম তারিখ / Date of Birth	25 AUG 1975
পূর্ববর্তী পাসপোর্ট নং / Previous Passport No.	OA2002774
লিঙ্গ / Sex	M
জন্মস্থান / Place of Birth	KUSHTIA
প্রদানের তারিখ / Date of Issue	21 JAN 2016
প্রদানকারী কর্তৃপক্ষ / Issuing Authority	DIP / DHAKA
মেয়াদোত্তীর্ণের তারিখ / Date of Expiry	20 JAN 2021
স্বাক্ষর / Holder's Signature	

PGBGDHOSSAIN<<M<K<H<JAHANGIR<<<<<<<<<<<<<<<<<<<
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