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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	MOHAMMAD REZAUL
MIDDLE NAME	KABIR
LAST NAME	KHAN
Name in local script (Name, middle name, last name)	REZAUL
Sex	Male ☐√ Female ☐
Date of Birth (DD/MM/YY)	15/10/1965
Country of Birth	BANGLADESH
City/Village	MYMENSINGH TOWN
State/Province	N/A
ID DOCUMENTS	
Passport Number	**EB 0626181**
National ID number	19652696653275494
EMPLOYMENT INFORMATION	
Agency type	Law Enforcement ☐√ Other ☐
Complete Name of the Agency	Criminal Investigation Department
Ministry	**Home Ministry**
Department	**CID**
Division	**Organized Crime**
Sub-division/Unit	**Trafficking in Human Being (THB)**
Duty Station Address	**CID Head Quarter**
Official Position/Title, Rank	**Police Inspector**
Are you authorized to carry a gun?	Yes ☐√ No ☐
Are you authorized to arrest?	Yes ☐ √ No ☐
CONTACT DETAILS	
Telephone number (work)	**029331043**
Mobile number	**01711100831**
Email	**kanta75a@gmail.com**
Skype ID (if applicable)	

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LANGUAGE	
Languages spoken	**English, Bengali**

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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PERSONAL DATA AND EMERGENCY CONTACT

Name: MOHAMMAD REZAUL KABIR KHAN
Father's Name: MOHAMMAD OSMAN GANI KHAN
Mother's Name: HAMIDA BEGUM
Spouse's Name: ASHRAF JAHAN
Permanent Address: HOUSE-153/GA, EAST RAZA BAZAR, TEJGAON, SHER-E-BANGLA NAGAR, DHAKA

Emergency Contact:
Name: ASHRAF JAHAN
Relationship: SPOUSE
Address: HOUSE-153/GA, EAST RAZA BAZAR, TEJGAON, SHER-E-BANGLA NAGAR, DHAKA
Telephone No: 01724074779

পাসপোর্ট নম্বর / PASSPORT No. EB 0626181

MD. GOLAM YEASIN
Deputy Assistant Director
Department of Immigration & Passports
Govt. of the People's Republic of Bangladesh
Dhaka

পাসপোর্ট PASSPORT

গণপ্রজাতন্ত্রী বাংলাদেশ People's Republic of Bangladesh

টাইপ / Type: P
দেশ কোড / Country Code: BGD
পাসপোর্ট নং / Passport No.: EB0626181



বংশগত নাম / Surname
KHAN
প্রদত্ত নাম / Given Name
MOHAMMAD REZAUL KABIR
জাতীয়তা / Nationality
BANGLADESHI
ব্যক্তিগত নং / Personal No.
19652696653275494
জন্ম তারিখ / Date of Birth
15 OCT 1965
পূর্ববর্তী পাসপোর্ট নং / Previous Passport No.
লিঙ্গ / Sex
M
জন্মস্থান / Place of Birth
DHAKA
প্রদানের তারিখ / Date of Issue
04 AUG 2019
প্রদানকারী কর্তৃপক্ষ / Issuing Authority
DIP / DHAKA
মেয়াদোত্তীর্ণের তারিখ / Date of Expiry
03 AUG 2024
ধারকের / Holder's Signature

P<BGDKHAN<<MOHAMMAD<REZAUL<KABIR<<<<<<<<<<<<<
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