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	**Nashid**
MIDDLE NAME	
LAST NAME	**Farhad**
Name in local script (Name, middle name, last name)	নাসিদ ফরহাদ
Sex	Male ☒ Female ☐
Date of Birth (DD/MM/YY)	22/11/1990
Country of Birth	Bangladesh
City/Village	Dhaka
State/Province	Dhaka
ID DOCUMENTS	
Passport Number	**BG 0020806**
National ID number	5988982285
EMPLOYMENT INFORMATION	
Agency type	Law Enforcement ☒ Other ☐
Complete Name of the Agency	Criminal Investigation Department
Ministry	**Ministry Of Home Affairs**
Department	**Bangladesh Police**
Division	**Public Security Division**
Sub-division/Unit	**Criminal Investigation Department**
Duty Station Address	**Chemical Laboratory, CID, Mohakhali, Dhaka**
Official Position/Title, Rank	**Assistant Superintendent of Police**
Are you authorized to carry a gun?	Yes ☒ No ☐
Are you authorized to arrest?	Yes ☒ No ☐
CONTACT DETAILS	
Telephone number (work)	**01730336272**
Mobile number	**01737392094**
Email	**farhadnashid@gmail.com**
Skype ID (if applicable)	

LANGUAGE

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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	**NA**
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:

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

PERSONAL DATA AND EMERGENCY CONTACT

Name: NASHID FARHAD
Father's Name: MD NUR-UN-NABI
Mother's Name: NASRIN AKHTER
Spouse's Name: NA
Permanent Address: SUPTI NEER, POST OFFICE PARA, NOLDANGA, KALIGANJ, JHENAIDAH

Emergency Contact:
Name: MD NUR-UN-NABI
Relationship: FATHER
Address: SUPTI NEER, POST OFFICE PARA, NOLDANGA, KALIGANJ, JHENAIDAH
Telephone No: 01711806874

পাসপোর্ট নম্বর / PASSPORT No. BG 0020806

UMMAY SHAKILA TANIA
Assistant Director
Department of Immigration & Passports
Govt. of the People's Republic of Bangladesh
Dhaka

পাসপোর্ট
PASSPORT

গণপ্রজাতন্ত্রী বাংলাদেশ People's Republic of Bangladesh

শ্রেণী / Type	দেশ কোড / Country Code	পাসপোর্ট নং / Passport No.
PG	BGD	BG0020806

বংশগত নাম / Surname
FARHAD

প্রদত্ত নাম / Given Name
NASHID

জাতীয়তা / Nationality
BANGLADESHI

ব্যক্তিগত নং / Personal No.
19902697520000013

জন্ম তারিখ / Date of Birth
22 NOV 1990

পূর্ববর্তী পাসপোর্ট নং / Previous Passport No.
BE0452456

লিঙ্গ / Sex | জন্মস্থান / Place of Birth
M | DHAKA

প্রদানের তারিখ / Date of Issue
04 DEC 2019

প্রদানকারী কর্তৃপক্ষ / Issuing Authority
DIP / DHAKA

মেয়াদোত্তীর্ণের তারিখ / Date of Expiry
03 DEC 2024

স্বাক্ষর / Holder's Signature

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