



**STRENGTHENING MANUFACTURING ENTERPRISES THROUGH  
QUALITY AND PRODUCTIVITY IMPROVEMENT (KAIZEN) PHASE 2  
IN THE UNITED REPUBLIC OF TANZANIA**



**APPLICATION FORM FOR TRAINER CANDIDATE**

**PERSONAL INFORMATION**

Name  
 Address  
 Telephone  
 Mobile  
 Fax  
 E-mail  
 Nationality  
 Main field of Consulting  
 Membership in professional  
 bodies (consultant  
 organizations/associations)  
 (please list if applicable)

Date of birth :  
 Gender M  F

**KAIZEN PROJECT REQUIREMENTS**

**Number of Years Experience as a consultant** :  
**Number of Clients served in the field of production management in the past three (3) years** :

Identify the techniques you are familiar with:

- Quality Control Yes  No  a Little
- Production Planning Yes  No  a Little
- Process Control Yes  No  a Little
- Process Layout Analysis Yes  No  a Little
- Production Cost Control Yes  No  a Little
- Inventory Control Yes  No  a Little
- Others(s)

**WORK EXPERIENCE**  
 (Start From the Last position)

- Dates (from – to)
- Name and address of



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employer

- Type of Position Held: is

**Dates (from – to)**

- *Name and address of employer*

- **Main activities and responsibilities**

- **position held**

**EDUCATION AND TRAINING**

- Dates (from – to) :

- Name and type of organization providing education and training :

- Principal :

subjects/occupational

skills covered

- Title of qualification :

awarded

- Level in national classification :

(if appropriate)



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**PERSONAL SKILLS  
AND COMPETENCIES**

*Acquired in the course of  
life and career but not  
necessarily covered by  
formal certificates and  
diplomas.*

**MOTHER TONGUE KICHAGA**

**OTHER LANGUAGES**

- Reading skills
- Writing skills
- Verbal skills

**TECHNICAL SKILLS  
AND COMPETENCIES**

*With computers, specific  
kinds of equipment,  
machinery, etc.*

**DRIVING LICENCE(S)** ✓

**ADDITIONAL  
INFORMATION**



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**Part (3): Substantive Questions**

1)	Describe the reason you wish to participate in this Program. (Less than 200 words)
2)	List any specific training/skills you would like to have in this training:
3)	Can you make a firm commitment to participate in the training program? (Please check the invitation paper) <span style="float: right;">Yes <input type="checkbox"/> No <input type="checkbox"/></span>
<b>Name</b>	
  <b>X</b> _____	
Signature _____ Date _____	