



KEMENTERIAN PEKERJAAN UMUM
BADAN PENGEMBANGAN SUMBER DAYA MANUSIA

Jl. Pattimura No. 20, Kebayoran Baru - Jakarta Selatan, 12110, Tlp./Fax (021) 27515702

Nomor : SM 04-MS/2059
Sifat : Segera
Lampiran : 1 (satu) berkas
Hal : Penawaran Program Pelatihan *JICA Technical Cooperation Project on Regional Waste Management in Gerbangkertosusila Area*

Jakarta, 28 November 2024

Yth.

Sekretaris Direktorat Jenderal Cipta Karya

di -

Jakarta

Sehubungan dengan surat Kepala Biro Perencanaan Anggaran dan Kerja Sama Luar Negeri Nomor KP.09.01-Sr/775 tanggal 22 November 2024 hal Penawaran Pelatihan Pemerintah Jepang (*JICA Technical Cooperation Project on Regional Waste Management in Gerbangkertosusila Area*) dengan hormat kami sampaikan penawaran program sebagai berikut :

1. Pelatihan (*JICA Technical Cooperation Project on Regional Waste Management in Gerbangkertosusila*) akan diselenggarakan di Jepang pada 5 Februari 2025 – 15 Februari 2025.
2. Biaya keikutsertaan program tersebut ditanggung oleh Pemerintah Jepang/JICA.
3. Kualifikasi dasar peserta :
 - a) Sehat secara fisik dan mental;
 - b) Mampu berbahasa Inggris lisan dan tulisan (dilampirkan sertifikat kemampuan Bahasa Inggris);
4. Kelengkapan Dokumen peserta :
 - a) *JICA Application Form*;
 - b) Fotocopy Paspor yang masih berlaku
5. Informasi, *application form* serta keterangan lebih lanjut terkait program pelatihan ini sebagaimana terlampir.
6. Diutamakan calon peserta yang berprestasi dan memiliki kinerja baik;
7. Calon peserta yang memenuhi syarat **beserta dokumen persyaratan lengkap** dapat diusulkan kepada Sekretariat Badan Pengembangan Sumber Daya Manusia c.q. Bagian Hukum, Kerja sama dan Komunikasi Publik **selambat-lambatnya tanggal 13 Desember 2024** (hanya kandidat dengan dokumen persyaratan lengkap yang akan diproses).

Demikian kami sampaikan. Atas perhatiannya kami ucapkan terima kasih.

Sekretaris Badan Pengembangan
Sumber Daya Manusia,



Dr. Dewi Chomistrigina, S.T., M.Sc. IPU
NIP. 197101281996032002

Tembusan :

1. Kepala Badan Pengembangan Sumber Daya Manusia;
2. Kepala Biro Perencanaan Anggaran dan Kerjasama Luar Negeri.



KEMENTERIAN PEKERJAAN UMUM
SEKRETARIAT JENDERAL

Jalan Pattimura Nomor 20, Kebayoran Baru, Jakarta 12110, Telepon (021) 7392681, Faksimili (021) 7243623

Nomor : *KP.03.01-Sr/775*
Sifat : **SEGERA**
Lampiran :
Hal : **Penawaran Pelatihan Pemerintah Jepang
(JICA) Technical Cooperation Project on
Regional Waste Management in
Gerbangkertosusila Area**

Jakarta, 22 November 2024

Yth.

Sekretaris Badan Pengembangan Sumber Daya Manusia
di-
Jakarta

Sehubungan dengan surat *Senior Representative, Japan International Cooperation Agency (JICA) Indonesia Office* nomor 074/IL/11/2024 tanggal 14 November 2024 (salinan surat terlampir), bersama ini dengan hormat disampaikan hal-hal sebagai berikut:

1. Pemerintah Jepang memberikan penawaran program pelatihan sebagai berikut:
 - a. Bidang : **Case Studies on Regional Waste Management, Intermediate Treatment and Other Methods (Second Course) (2014030008-J002)**
 - b. Jadwal pelaksanaan : 5-15 Februari 2025
 - c. Batas waktu pendaftaran: 16 Desember 2024
 - d. Biaya : Seluruh biaya ditanggung oleh Pemerintah Jepang (JICA)
2. Sehubungan dengan hal tersebut, mohon dapat menginformasikan kepada Unit Organisasi di Kementerian Pekerjaan Umum.
3. Selanjutnya calon yang memenuhi persyaratan dapat disampaikan kepada Biro Perencanaan Anggaran dan Kerja Sama Luar Negeri untuk diproses lebih lanjut.

Demikian kami sampaikan. Atas perhatian dan kerjasamanya, diucapkan terima kasih.

Kepala Biro Perencanaan Anggaran
dan Kerja Sama Luar Negeri


Ir. Edy Juharsyah, M.Tech.
NIP. 196705121993031004

Tembusan:

1. Bapak Sekretaris Jenderal Kementerian PU (sebagai laporan);
2. Bapak Kepala Badan Pengembangan Sumber Daya Manusia, Kementerian PU;
3. Kepala Biro Kepegawaian, Organisasi dan Tata Laksana, Sekretariat Jenderal, Kementerian PU.



Japan International Cooperation Agency

JICA Indonesia Office
Satrio Sarayan II, 14th Floor
Jl. Asia Afrika No. 8 Jakarta 10270 INDONESIA
Tel: (62) 21 5795 2112 (main line) Fax: (62) 21 5795 2110

No. 074/IL/11/2024

Jakarta, November 14th, 2024

Attention to:

1. Head of Bureau for Technical Cooperation
Ministry of State Secretariat RI
2. Head of Bureau of Budget Planning and International Cooperation
Ministry of Public Works (Kementrian PU)
3. Head of Center for Facilitation of Cooperation
Ministry of Home Affairs (Kemendagri)

Information of Knowledge Co-Creation Program (Country Focus):
Technical Cooperation Project on Regional Solid Waste Management in Gerbangkertosusila Area

Dear Sir/Madam,

We have the pleasure to inform you that the Government of Japan through the Japan International Cooperation Agency (JICA) is planning to conduct the above titled program as follows:

Name of Program	: Case Studies on Regional Waste Management, Intermediate Treatment and Other Methods (Second course) [201403008-J002]
Period of Program in Japan	: February 5th – 15th, 2025
Number of Participants	: 10 (Ten) persons
Training Institution	: JICA Kyushu Center
Document for Submission	: a. JICA Application Form : 1 set b. Photocopy of Passport* : 1 set *Should be submitted together with Application Form
Target Institution and its expected number of participants	: 1. Ministry of Public Works (PU) <ul style="list-style-type: none">- Directorate of Sanitation, DG of Human Settlements (1 person)- Settlement Infrastructure Agency of East Java Province (1 person) 2. Ministry of Home Affairs (Kemendagri) <ul style="list-style-type: none">- Public Housing, Residential Area, and Human Settlements (DPRKPCK) Office of East Java Province (1 person)- Environmental Office (DLH) of East Java Province (1 Person)- Planning and Development Agency (BAPPEDA) of East Java Province (1 person)- Environmental Office (DLH) of Sidoarjo Regency (1 person)- Environmental Office (DLH) of Mojokerto Regency (1 person)- Environmental Office (DLH) of Mojokerto City (1 person)- Environmental Office (DLH) of Lamongan Regency (1 person)- Environmental Office (DLH) of Gresik Regency (1 person)

In this regard, I would appreciate it if you could nominate appropriate candidates by coordinating with the authorities and prepare Application Form. Please be informed that the original Application Form should be submitted to JICA Indonesia Office through Ministry of State Secretariat by **December 16th, 2024**.



Japan International Cooperation Agency

JICA Indonesia Office
Sentra Schuyam, 14th Floor
J. Arafata No. 2, Jakarta 10270 / INDONESIA
☎ (62 21) 5795 2112 (p. + indog) Fax (62 21) 5795 2113

On the other, I would like to ask you to send the copy of Application Form to JICA Indonesia Office in advance when you will prepare it.

Selected candidates must be in good health, both physically and mentally to participate in the Program in Japan. Pregnant applicants are not recommended to apply due to the potential risk of health and life issues of mother and fetus.

JICA Program will provide the following costs based on JICA's regulation of Knowledge Co-Creation Program as follows:

- Round trip international airfare from/to the designated airport in Indonesia and airport in Japan.
 - Daily allowance, accommodation, and local transportation during the program in Japan.
- (Domestic airfare to/from Jakarta shall be covered by the organization which the participants belong to)

Please be informed that the original JICA Application Form should be submitted to JICA Indonesia Office through Ministry of State Secretariat. The document can be downloaded through the following address:

http://www.jica.go.jp/indonesia/english/office/others/data_AF.html

{Application Form for Knowledge Co-Creation Program for GRF and CF (November 2023) in WORD/PDF}.

It would be appreciated if you could convey the above information to the authorities concerned.

Thank you for your kind attention and cooperation.

Sincerely yours,




Nozomu ONO
Senior Representative
JICA Indonesia Office

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Japan International Cooperation Agency

JICA Indonesia Office
Sentral Sarayan II, 14th Floor
J. Asia Afrika No. 8, Jakarta 10270, INDONESIA
Tel: (62 21) 5795 2112 (tuntug) Fax: (62 21) 5795 2110

Cc:

1. **Embassy of Japan**

- Minister for Economic and Development Affairs

2. **Ministry of Public Works**

- Director General of Human Settlements
- Director of Sanitation
- Head of Human Resources Development Agency
- Head of Regional Settlement Infrastructure Agency (Balai PPW) of East Java Province

3. **Ministry of Home Affairs**

- Regional Secretary of Secretariat Office of East Java Province
- Head of Government and Regional Autonomy Bureau of the Regional Secretariat of East Java Province
- Head of Department for Public Housing, Settlement Areas, and Human Settlements, East Java Province (DPRKPCK) Office of East Java Province
- Head of Department of Environment (DLH) of East Java Province
- Head of Department of Planning and Development (BAPPEDA) of East Java Province
- Head of Environmental Office (DLH) of Sidoarjo Regency
- Head of Environmental Office (DLH) of Mojokerto City
- Head of Environmental Office (DLH) of Mojokerto Regency
- Head of Environmental Office (DLH) of Lamongan Regency
- Head of Environmental Office (DLH) of Gresik Regency



Application Guideline for the JICA Knowledge Co-Creation Program

This guideline explains how to apply for the Knowledge Co-Creation program (KCCP) of the Japan International Cooperation Agency (JICA) under the Official Development Assistance Program of the Government of Japan.

Please complete the Application Forms according to the guideline. For additional information, please consult the JICA Office, or in its absence, the Embassy of Japan in your country.

Form	Filled by
Form1. Official Application Form	<ul style="list-style-type: none">• To be filled by you and your supervisor*• To be signed by your supervisor• Official stamp of your organization is needed.
Form2. Nomination from the Organization	You and your supervisor *
Form3. Individual Application Form	You
Form4. Questionnaire on Medical Status and Restrictions	You
Form5. Terms and Conditions, and Declaration	You

*Supervisor: the head of the department/division of your organization

Please be advised:

- To carefully read the General Information (GI) of the KCCP,
- To fill only in typewritten except for signature,
- To fill in the form in **English**,
- To use “√” or “x” to mark the () options,
- To attach your photographs,
- To prepare document(s) described in the GI and/or confer with the JICA Expert or JICA overseas office, and attach these documents to the completed Application Forms,

In submitting the Application Forms and attached documents, please make sure:

- To prepare a copy of your passport,
- To confirm the application procedure stipulated by your government,
- To submit the original Application Forms with all necessary document(s) to the responsible organization of your government according to its application procedure, and
- That your participation may be denied, if you fail to provide all required information and documents completely and on time.

**CHECK LIST before submission:**

Items	Form No.	Check
1. Fill in all items in typewritten	All the forms	
2. Your signature	Form 3, 4, 5	
3. Signature of your supervisor*	Form 1, 2	
4. Official stamp of your organization	Form 1	
5. Your photo	Form 3	
6. Attach a copy of passport (Machine Readable Zone) *Applicants from Latin American and the Caribbean Countries, please refer to the note below.	-	
7. Attach the required document(s) as instructed in the GI	-	

*Supervisor: the head of the department/division of your organization

Note for Applicants from Latin American and the Caribbean Countries:

- (1) If you are from any of the countries listed below and have a passport with a valid U.S. visa, please attach herewith a copy of Identification Pages on the inside cover of your passport (i.e. the two pages that include your photograph and detailed passport information), and the page of U.S. visa:

Antigua and Barbuda, Argentina (only Japanese descendants), Barbados, Bolivia, Brazil, Chile, Colombia, Dominica, Ecuador, Grenada, Guatemala, Guyana, Haiti, Mexico, Peru, Rep. of Dominica, St. Christopher and Nevis, St. Lucia, St. Vincent and the Grenadines, Suriname, or Venezuela.

- (2) If you are from any of countries listed below and have a passport without a valid U.S. visa, please attach herewith a copy of Identification Pages on the inside cover of your passport (i.e. the two pages that include your photograph and your detailed passport information).

Belize, Costa Rica, El Salvador, Honduras, Jamaica, Marshall, Micronesia, Nicaragua, Palau, Panama, Paraguay, Trinidad and Tobago, and Uruguay.



Application form for the JICA Knowledge Co-Creation Program:

Form1. OFFICIAL APPLICATION FORM***To be signed by your supervisor (the head of the relevant department / division of your organization).****1. Course Title** (as shown in the GI)**2. Course Number** (the number as "xxxxxxxxJxxx" shown in the GI)**3. Course Duration**From to (DD/MM/YYYY)**4. Country****5. Organization****6. Name of the Nominee(s)**

1)	3)
2)	4)

7. Confirmation by the organization in charge

Our organization hereby applies for the Knowledge Co-Creation Program of the Japan International Cooperation Agency and proposes to dispatch qualified nominees to participate in the programs.

Date:			Signature:		
Name:					
Title / Position				Official Stamp	
Department / Division					
Office Address and Contact Information	Address:				
	Tel:	E-mail:	Fax:		

(If necessary) Confirmation by the organization in charge

I have examined the documents in this form and found them true. Accordingly, I agree to nominate this person(s) on behalf of our government.



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Date:		Signature:	
Name:		Official Stamp	
Title / Position			
Department / Division			

MINISTRY (When this application is through a ministry.)

Our ministry hereby applies for the training and dialogue program of the Japan International Cooperation Agency and proposes to dispatch qualified nominees to participate in the programs.

Date:		Signature:	
	Name:		Official Stamp
	Title / Position		
	Department / Division		

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MINISTRY OF STATE SECRETARIAT

I have examined the documents in this form and found them true. Accordingly, I agree to nominate this person(s) on behalf of our government.

Date:		Signature:	
Name:		Official Stamp	
Title / Position			
Department / Division			

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Application form for the JICA Knowledge Co-Creation Program

Form2. NOMINATION FROM THE ORGANIZATION

***To be signed by your supervisor (the head of the relevant department / division of your organization).**

1. Reason for nominating the Applicant

Please describe the reason(s) why the Applicant was selected, referring to the following points; 1) Program requirement, 2) Capacity/Position, 3) Future plan to be done by the Applicant after the KCCP, 4) Future plan of your organization and 5) Others.

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2. Expectation and Future Plan of Actions

Please describe how your organization shall make use of the expected achievement of the Applicant after the program, in addressing the said issues or problems.

--

By nominator (head of relevant department/division)

Date

Name and
Title/Position



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Signature

Application form for the JICA Knowledge Co-Creation Program:

Form3. INDIVIDUAL APPLICATION FORM

*To be filled by Applicant.

1. Course Title: (as shown in the GI)

2. Course Number: (the number as "xxxxxxxxJxxx" shown in the GI)

Attach [here](#)
your photo

(taken within
the last six months)

Size: 4.5x3.5cm

3. Personal Information on Applicant

1) Name of Applicant (as shown in the passport)

*Please type the name as shown in the passport carried. The information will be used for flight arrangements.

Family Name /Surname

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

First Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Middle Name

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

2) Nationality (as shown in the passport)				
3) Sex (for VISA application)	() Male		() Female	
4) Date of Birth	Date	Month (ex. April)	Year	Age (as of the date of the form)

5) Passport/Visa

Passport possession	() Yes	() No	Expiry date of passport	Date	Month	Year
USA visa possession*	() Yes	() No				

*Applicants from Latin American and the Caribbean Countries only.

**6) Contact Information**

Private	Address:	
	TEL*:	Mobile*:
	FAX*:	E-mail:
Office	Address:	
	TEL*:	Mobile*:
	FAX*:	E-mail:
Emergency Contact	Name:	
	Relationship to you:	
	Address:	
	TEL*:	Mobile*:
	FAX*:	E-mail:

*Please fill it out from country code for telephone, mobile, and fax number.

7) Present Position

Organization		
Year that entered the organization		
Department / Division		
Title		
No. of years of service in the present position	Years	From (Month/Year)
Type of Organization	<input type="checkbox"/> National Government <input type="checkbox"/> Local Government <input type="checkbox"/> Public Enterprise <input type="checkbox"/> Private (profit) <input type="checkbox"/> NGO/Private (Non-profit) <input type="checkbox"/> University <input type="checkbox"/> Other : _____	
Number of employees		
Home Page Address		

【Questionnaire on Relationship with the Military】(FOR ALL THE APPLICANTS)**Please mark Yes or No about your status.**

(YES / NO) Personnel of the military or organizations under the military (active military personnel or military personnel listed in the muster roll/military register)
(YES / NO) Personnel of the Ministry of Defense, or organizations under the Ministry of Defense
(YES / NO) Personnel of organizations that are specified by law under the military or the Ministry of Defense in case of an emergency
(YES / NO) Persons listed in the muster roll/military register who are not currently affiliated with the military, the Ministry of Defense, or affiliated organizations
(YES / NO) Personnel of civilian organizations which have divisions to conduct military-related activities



4. Experience and Eligibility

1) Career Background (After graduation and before taking the present position)

**Only Applicants for KCCP (Group and Region Focused) are requested to fill in this part.*

Organization	City/ Country	Period		Position or Title and Department/Division	Brief Job Description
		From Month/Year	To Month/Year		

2) Academic Background (University, College or Higher Education)

Institution	City/ Country	Period		Degree	Major
		From Month/Year	To Month/Year		

3) Experience of Training or Study in Foreign Countries (including all the training experience in JICA's programs)

**Only Applicants for KCCP (Group and Region Focused) are requested to fill in this part.*

Institution	City/ Country	Period		Field of Study / Program Title
		From Month/Year	To Month/Year	

4) Language Proficiency (Self-Assessment)

1) Language to be used in the course (as shown in GI)					
Listening	() Excellent	() Good	() Fair	() Poor	
Speaking	() Excellent	() Good	() Fair	() Poor	
Reading	() Excellent	() Good	() Fair	() Poor	
Writing	() Excellent	() Good	() Fair	() Poor	
Language Test Scores if any (ex. TOEFL, TOEIC, etc.)					



2) Mother Tongue				
3) Other languages ()	() Excellent	() Good	() Fair	() Poor

Excellent	Refined fluency skills and topic-controlled discussions, debates & presentations. Formulates strategies to deal with various essay types, including narrative, comparison, cause-effect & argumentative essays.
Good	Conversational accuracy & fluency in a wide range of situations: discussions, short presentations & interviews. Compound complex sentences. Extended essay formation.
Fair	Broader range of language related to expressing opinions, giving advice, making suggestions. Limited compound and complex sentences & expanded paragraph formation.
Poor	Simple conversation level, such as self-introduction, brief question & answer using the present and past tenses.

5. Background and Purpose of Application

1) Current challenges in the organization in relation to the theme of the KCCP you are applying:

Describe the issues that your organization/department intends to tackle by participating in this program.

--

2) Main duties of Applicant: Describe your main duties and responsibilities in relation to this program.

--

3) Relevant Experience of Applicant: Describe previous occupational experiences that is highly relevant in this program.

--

4) Your individual Goal: Elaborate on your plans to apply the lessons learned from this program to your organization.

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5) **Area of Interest and/or your expectation:** Specify your particular interest with reference to the contents of this program.

--

By Applicant

Date
Name and Title/Position
Signature

**Form4. QUESTIONNAIRE ON MEDICAL STATUS AND RESTRICTION****(Self-Declaration)****1. Present Medical Status**

(a) Have you taken any medicine or had a medical checkup by a physician for your illness such as diabetes, hypertension, asthma, etc.?

<input type="checkbox"/> No	<input type="checkbox"/> Yes: Name of illness (), Name of medicine () <i>If yes, please attach your doctor's letter (preferably, written in English) that describes the current status of your illness, and gives agreement to your participation in the program.</i>
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(b) Do you have any allergies with medicine, food, pollen, etc.?

<input type="checkbox"/> No	<input type="checkbox"/> Yes: What are you allergic to? What kind of allergic symptoms do you have such as itch, rash, hives, etc.? ()
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(c) Please indicate any needs arising from disabilities that may require additional support or facilities.

() <i>Note: Disability will not lead to exclusion of the Applicant from the program. However, the Applicant may be directly inquired by the JICA official in charge for a more detailed account of his/her condition.</i>

2. Medical History

(a) Have you had any illness such as heart, hepatic, kidney disease, etc.?

<input type="checkbox"/> No	<input type="checkbox"/> Yes: Please specify ()
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(b) Have you or/and your family members had tuberculosis?

<input type="checkbox"/> No	<input type="checkbox"/> Yes: Please specify ()
-----------------------------	---

(c) Have you ever been a patient in a mental clinic or been treated by a psychiatrist?

<input type="checkbox"/> No	<input type="checkbox"/> Yes: Please specify ()
-----------------------------	---

(d) Have you ever had any sleeping, eating or other disorders?

<input type="checkbox"/> No	<input type="checkbox"/> Yes: Please specify () Name of medicine taken if any ()
-----------------------------	--

**3. Other Medical Issues/Conditions**

If you have any medical issues/conditions that are not described above, please indicate below.

--

* Are you pregnant?

<input type="checkbox"/> No	<input type="checkbox"/> Yes: Weeks of pregnancy (weeks)
-----------------------------	---

I certify that I have read the above instructions and answered all questions truthfully and completely to the best of my knowledge.

I understand that medical conditions resulting from pre-existing conditions will not be financially compensated by JICA, and may be a reason for termination of the program.

I understand that this questionnaire will be checked by the people who are engaged in the program during my stay in Japan.

By Applicant

Date
Name and Title/Position
Signature

※ Please notify JICA staff upon any changes in your health condition after submission of the form.



Form5. TERMS AND CONDITIONS

1. General Rules

The participants are requested:

- (1) to strictly observe the course schedule,
- (2) not to change the air ticket (and flight class and flight schedule arranged by JICA) and lodging by the participants themselves,
- (3) to understand that leaving Japan during the course period (to return to home country, etc.) is not allowed (except for programs longer than one year),
- (4) not to bring or invite any family members (except for programs longer than one year),
- (5) to carry out such instructions and abide by such conditions as may be stipulated by both the nominating Government and the Japanese Government in respect of the course,
- (6) to observe the rules and regulations of the program implementing partners to provide the program or establishments,
- (7) not to engage in political activities, or any form of employment for profit,
- (8) to discontinue the program, should the participants violate Japanese laws or JICA's regulations, or the participants commit illegal or immoral conduct, or get critical illness or serious injury and be considered unable to continue the course,
- (9) to return the total amount or a part of the expenditure for the KCCP depending on the severity of such violation, should the participants violate the laws and ordinances,
- (10) not to drive a car or motorbike, regardless of an international driving license possessed,
- (11) to observe the rules and regulations at the place of the participants' accommodation, and
- (12) to refund allowances or other benefits paid by JICA in the case of a change in schedule.

2. Privacy Policy

The participants are requested to understand Privacy Policy of JICA as follows.

(1) Scope of Use

Any information used for identifying individuals (hereinafter referred to as "Personal Information") that is acquired by JICA will be stored, used, or analyzed only within the scope of JICA activities. JICA reserves the right to use such Personal Information in accordance with the provisions of this privacy policy.

(2) Limitations on Use and Provision

JICA shall never intentionally provide Personal Information to any third party with the following three exceptions:

- (a) In cases of legally mandated disclosure requests;
- (b) In cases in which the provider of the Personal Information grants permission for its disclosure to a third party;
- (c) In cases in which JICA needs to provide Personal Information for the persons or entities where JICA contracts out all or part of the KCCP and its relevant projects.
The Personal Information provided herein will be only limited to the information necessary for the persons or entities to implement the contracted tasks.

(3) Security Notice

JICA takes measures required to prevent the divulgence, loss, or destruction of Personal



Information, and to otherwise properly manage such information.

※JICA's policy for the transfer of personal data from the European Economic Area (EEA) to outside the EEA (to Japan and third countries);

JICA has revised "Bylaws for the Implementation of Personal Information Protection" which was published based on Japan's legislation by adding new provisions regarding how to deal with personal data within the EEA in order to meet General Data Protection Regulations (GDPR's) requirements for data protection. Based on the new bylaws, JICA entered into the EU Standard Contractual Clauses (SCCs) which allows us to transfer personal data from offices within the EEA to offices outside the EEA (in Japan and third countries).

3. Copyright Policy

The participants are requested to comply with the following;

1. The participants shall use all the documents provided for the KCCP (including texts, materials, etc.), within the scopes and/or conditions separately approved by JICA and/or the Original Author.
If the participants apply to the KCCP, the participants shall also comply with Terms of Use of the Materials for the KCCP that are shown on the JICA website.
(https://www.jica.go.jp/english/our_work/types_of_assistance/tech/acceptance/training/index.html)
2. All the documents prepared for the KCCP (including reports, action plans, presentations, etc.) shall be prepared by the participants themselves in principle. If the participants use any third party's(ies') works (photograph, illustration, map, figures, etc.), which are protected under the copyright laws and regulations in the participants' countries or copyright-related multinational agreements, the participants shall obtain a license necessary to use the works from such third party(ies).
3. The participants agree that JICA may use (including, but not limited to, reproduce, publicly transmit, distribute and modify) any documents prepared by the participants for other programs conducted by JICA (for example, as a reference for the other KCCP courses and a project formulation).
4. JICA will not be liable for the contents of any documents created by the participants for the purpose of the KCCP.

4. Portrait Right Policy

During the implementation period of KCCP, JICA (including hired photographer and program implementing partners) will shoot photographs and video footage mainly for the following purposes:

- Use on the website or in SNS administrated/operated by JICA,
- Use in JICA publications (public relations magazines, annual reports, journals, etc.) in printed or electronic form,

*Photos and images taken will not be used for commercial purposes and the participants' personal information will not be disclosed to any third party without the consent of the participants.

JICA would appreciate it if the participants of KCCP grant the participants themselves portrait



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right license to JICA for photos and images taken described above.

It is, however, not a requirement of KCCP. The participants do not agree to grant the participants themselves portrait right license to JICA, has absolutely no problem in participating KCCP. JICA respects the intention of each participant.

DECLARATION (to be signed by the Applicant)

• I understand and fully agree to the following terms and conditions set forth above.

1. General Rule
2. Privacy Policy
3. Copyright Policy

• I will be subject to any penalties imposed as a consequence of my failure to abide by the above terms and conditions.

• I understand the intention of JICA on “4.Portrait Right Policy” mentioned above, and my intention for usage/publication of photographs and videos including the portrait of myself by JICA for the purpose above is as follows:

☐ Agree / ☐ Disagree

• I certify that the statements I made in this form are true, complete and correct to the best of my knowledge and belief.

By Applicant

Date

Name and
Title/Position

Signature