## WMO OMM



World Meteorological Organization Organisation météorologique mondiale Organización Meteorológica Mundial Всемирная метеорологическая организация المنظمة العالية للأرصاد الجوية 世界气象组织 Secrétariat 7 bis, avenue de la Paix – Case postale 2300 CH 1211 Genève 2 – Suisse Tél.: +41 (0) 22 730 81 11 Fax: +41 (0) 22 730 81 81 wmo@wmo.int – public.wmo.int

30 November 2023

Our ref.: 26022/2023/S/DMPS/TCP

Annex: 1 (available in English only)

Subject: ESCAP/WMO Typhoon Committee Attachment Training 2024 at the RSMC Tokyo, Japan 15-26 January 2024

Action required: Nomination of one participant by **11 December 2023** 

Dear Sir/Madam,

I am pleased to inform you that, at the kind invitation of the Government of Japan, the RSMC Tokyo attachment training will be resumed to organize on-site in Tokyo, Japan, from 15 to 26 January 2024. Japan Meteorological Agency (JMA) requested to invite three PTC Members to nominate an expert from each to attend the RSMC Tokyo attachment training. It was identified that Pakistan, Saudi Arabia, and Sri Lanka are invited to attend this training.

The goal of this training is for capacity development of the Members of the Typhoon Committee and the Panel on Tropical Cyclones by improving competencies and skills for forecasters engaged in tropical cyclone forecasting.

In this regard, you are kindly invited to nominate one expert from your Services to join the attachment training. The World Meteorological Organization (WMO) through Japan Trust Fund will provide financial support of a round air-ticket and Daily Substance Allowance (DSA) for the period to each participant. I should be grateful if you could notify the WMO Secretariat of your nomination on or before **11 December** Considering the holiday season is coming, all funding arrangements need to be completed before the Christmas holidays.

Regarding insurance coverage for non-staff members, may I draw your attention to the following:

"Non-staff members of WMO who are authorized to travel at the Organization's expense and/or who are receiving a DSA from WMO must ensure they are fully responsible for expenses incurred in the event of death, illness or injury during official travel and attendance at meetings on behalf of the Organization. They are, therefore, fully responsible for arranging life, health, accident, as well as any other forms of insurance with an adequate level of coverage for the duration of such meetings and events. WMO liability is limited to the performance of services or attendance at a meeting on behalf of the Organization, is covered by an injury and illness benefit insurance which provides a limited coverage for medical, emergency, and supplementary official travel expenses."

The documents pertaining to the meeting will be made available in due course. For administrative purposes, I should be grateful if you could notify the WMO Secretariat Mr Raymund Flores (rflores@wmo.int), Mr Ryutaro Ikeda (rikeda@wmo.int), and Dr Taoyong Peng (tpeng@wmo.int)) at your earliest convenience, but not later than **11 December 2023**, of your nomination and whether financial assistance would be required.

To: Permanent Representatives of Members with WMO Pakistan, Saudi Arabia and Sri Lanka (Limited distribution)

I take this opportunity to convey our season's greetings, and to thank you for your continued support and contribution to the WMO activities.

Yours faithfully,

Dr Elena Manaenkova for the Secretary-General

## **REQUEST FOR TRAVEL VISA(S) WITH THE ASSISTANCE OF WMO**

## To be completed by the Participant

Please note, WMO can, if required and upon request, send a letter to the Embassy or Consulate concerned, indicating that you will participate in the above-mentioned meeting.

This letter is sent to the Embassy/Consulate exclusively by e-mail. In order to prepare the letter, a copy of the passport id page is required.

Please submit this form as early as possible, as in some cases there is a considerable delay to process.

PLEASE PROVIDE THE FOLLOWING INFORMATION EXACTLY AS IT APPEARS IN YOUR PASSPORT		
Dr / Mr / Ms /Prof		
FAMILY NAME		
FIRST NAME		
PASSPORT NO.		
DATE OF BIRTH		
DATE OF ISSUE		
DATE OF EXPIRY		

<b>P</b> ROFESSIONAL ADDRESS		
ORGANIZATION		
SECTION / DIVISION /		
Street		
CITY & COUNTRY		
E-MAIL (ESSENTIAL)		
TEL		
CONTACT DETAILS OF THE EMBASSY/CONSULATE ISSUING THE ENTRY VISA FOR THE MEETING		CONTACT DETAILS OF THE EMBASSY/CONSULATE ISSUING A TRANSIT VISA (IF APPLICABLE)
EMBASSY OF		
CITY		
COUNTRY		
E-MAIL (ESSENTIAL)		

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_