

**SCHOLARSHIP APPLICATION**  
**2009 Asian Pension Fund Roundtable**  
**November 4-6, 2009 · Bangkok, Thailand**

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Thank you for your interest in attending PPI's seventh annual Asian Pension Fund Roundtable in Bangkok, Thailand. Please complete the following form by typing in your responses and returning it to PPI's Program Officer, John Hunter Gray, by e-mail at [jgray@pacificpension.org](mailto:jgray@pacificpension.org) or by fax at +1 415-576-1189. Your responses will help us in the selection process, so please feel free to use as much space as is necessary to complete your responses.

Scholarship funds are made available to public pension fund and associated government agencies through the generous support of our corporate sponsors, and are intended to help defray the costs of participation in the Asian Roundtable. Funding is limited and due to strong interest, PPI may limit the scholarships to two awards per qualifying organization or country.<sup>1</sup> Scholarship awards are paid by wire transfer *after* the Asian Roundtable has concluded. In order to expedite the transfer of funds, please complete the wire transfer information found on page 2 of this document.

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**Salutation (Mr./Ms., etc.):**

**Family Name:**

**First Name:**

**Gender (male/female):**

**Name as you would like it  
to appear on your nametag:**

**Organization:**

**Job Title:**

**Street Address:**

**City:**

**Country:**

**Postal Code:**

**Telephone:**

**E-mail Address:**

**Please describe below the organization you are working for now:**

**Please describe below the nature of your work:**

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<sup>1</sup> Qualifying organizations include public pension funds, plan sponsors, and social security organizations, government ministries and regulators responsible for oversight of the pension/social security industry, and policymakers. Associated organizations not directly involved with the provision or oversight of pension funds and social security funds will be considered on a case-by-case basis.



**Wire Transfers:** the **BLUE** items are *required* information

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**Beneficiary Information**

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Name:

Address:

Account Name:

Account Number:

Contact Name:

Telephone Number:

E-mail Address:

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**Beneficiary Bank**

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Bank Name:

Bank Address:

ABA (numbers):

SWIFT (letters/numbers):

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**Intermediary Bank**

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Bank Name:

Bank Address:

ABA (numbers):

SWIFT (letters/numbers):

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