

# BIO-DATA

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INTERNATIONAL COOPERATION ADMINISTRATION  
BIOGRAPHICAL DATA  
On Technical Cooperation Participants

**UNIT 2**

ACTION INFO.

DATE SENT

DATE RECEIVED

ATTACHMENTS

PIO/P NO.

31-27-104-1-90004

COUNTRY

Austria

PROPOSED ARRIVAL DATE U. S.

May/June 1959

ACTIVITY TITLE Management Productivity Team: Management Training and Education

FIELD OF ACTIVITY

Industry

PROPOSED DURATION OF VISIT

5-6 weeks

INSTRUCTIONS TO PARTICIPANTS: Prepare this form on a typewriter in English. In order to prevent delay and to assist in planning your program, answer every question clearly and completely. If more space is needed, use continuation sheet Page 3.

HERCZEG INFORMATION REGARDING PARTICIPANT

1. NAME (Last or Surname in capital letters) **HERCZEG** (First) **CHARLES** (Middle) **LADISLAUS** SEX (M or F) **M**

2. ADDRESS (Street) **Franz Kleingasse 1** (City or Town) **Vienna 19.,** (Country) **Austria**

3. BIRTH DATE (Day, Month, Year) **2 Feb 1924** 4. BIRTH PLACE (City & Country) **Fünfkirchen, Hungary** 5. COUNTRY OF CITIZENSHIP **Austria**

6. PLEASE PROVIDE THE FOLLOWING INFORMATION FOR YOUR SPOUSE, YOUR FATHER, AND YOUR MOTHER			
SPOUSE	NAME	DATE OF BIRTH	PLACE OF BIRTH
MOTHER	<b>Gisela Herczeg, nee Gschwandtner</b>	<b>June 17, 1894</b>	<b>Szaszvar, Hungary</b>
FATHER	<b>Dr. Ing. Josef Herczeg</b>	<b>Dec 7, 1886</b>	<b>Homonnau, Hungary</b> OCCUPATION <b>Mine Director</b>

7. PERSON AT HOME TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address and Relationship)  
**Dr. Ing. Josef Herczeg, Zedlitzgasse 11/10, Vienna 1., Austria - father**

8. PERSON IN U. S. TO BE NOTIFIED IN CASE OF EMERGENCY (Name, Address and Relationship)

9. HAVE YOU EVER BEEN IN THE U. S.? IF SO, WHEN, WHERE, FOR HOW LONG AND FOR WHAT PURPOSE?  
**1953/54 by invitation of Harvard University, Cambridge, Mass.**

10. HAVE YOU EVER TRAVELLED TO COUNTRIES OTHER THAN U. S., IF SO, WHEN, WHERE, AND FOR HOW LONG? (Include travel for educational purposes as well as pleasure)  
**in almost all European countries with exception of the Eastern iron curtain countries**

11. HAVE YOU PARTICIPATED IN OR APPLIED FOR ANY OTHER U. S., U. N., OR PRIVATE TECHNICAL ASSISTANCE ACTIVITY? IF SO, SPECIFY:  
**No**

12. LIST MEMBERSHIP IN EDUCATIONAL, PROFESSIONAL, AGRICULTURAL, LABOR OR OTHER TYPES OF ORGANIZATIONS AND SOCIETIES OF A SIMILAR NATURE, IF YOU HOLD OFFICE IN ANY OF THESE ORGANIZATIONS, SPECIFY.  
**Numerous scientific societies in Austria and abroad**

13. OBJECT OF PROPOSED VISIT. BE SPECIFIC. INDICATE FIELD OF ENDEAVOR, CROP, PRODUCT, PROCESS, TECHNIQUE, ETC. TO BE OBSERVED, STUDIED, OR WORKED ON. E. G. MILK MARKETING ETC.  
**To study the measures taken in the US by the business community to train junior executives for management positions and for training present managers to become more effective.**

BIOGRAPHICAL DATA ON TECHNICAL COOPERATION PARTICIPANTS

NAME OF PARTICIPANT <b>Karl HERCZEG</b>	COUNTRY <b>Austria</b>	DATE OF BIRTH <b>Feb 2, 1924</b>
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14. EDUCATION: INCLUDE INFORMATION CONCERNING PREPARATORY OR SECONDARY SCHOOLS, UNIVERSITIES OR OTHER INSTITUTIONS OF EQUIVALENT RANKS, IF YOU ATTENDED A TRADE OR VOCATIONAL SCHOOL OR COMPLETED APPRENTICESHIP INCLUDE THAT ALSO.

SCHOOLS ATTENDED	TYPE	COURSE OF STUDY OR MAJOR	DEGREES, DIPLOMAS OR CERTIFICATES	DATE	
				FROM	TO
Primary School	Elementary			1930	1934
High School		Leaving Certif.		1934	1942
College of Economics			Diploma (M)	1946	1950
Dr. of Econ., University Lecturer					

15. EMPLOYMENT

(A) EXACT TITLE OF YOUR PRESENT POSITION <b>Lecturer and Assistant</b>	DATE EMPLOYED FROM <b>1952</b> TO PRESENT TIME
PRESENT EMPLOYER'S NAME AND ADDRESS <b>College of Economics, Franz Kleingasse 1, Vienna 19., Austria</b>	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business)

KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>University College</b>	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISE, IF ANY
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DESCRIPTION OF YOUR DUTIES  
**Besides of teaching lecturing in seminars for managers, high school teachers, foremen, etc., and consultant activities**

(B) DO YOU EXPECT TO RETURN TO THIS SAME POSITION?  YES ( ) NO IF NOT, HOW IS THE PROGRAM RELATED TO YOUR STUDIES AND FUTURE PLANS?

(C) EXACT TITLE OF YOUR LAST PREVIOUS POSITION <b>Member of General Secretariate</b>	DATES EMPLOYED FROM <b>1955</b> TO <b>1958</b>
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PREVIOUS EMPLOYER'S NAME AND ADDRESS <b>OEEC, 2 Rue Andre Pascal, Paris 16, France</b>	APPROXIMATE SIZE OF BUSINESS OR ORGANIZATION (Number of employees or volume of business)
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KIND OF BUSINESS OR ORGANIZATION (Foundry, Milk Marketing, Cotton Textile Mfg., etc.) <b>International Organisation</b>	MACHINES OPERATED (if applicable)	NUMBER AND KIND OF EMPLOYEES YOU SUPERVISED, IF ANY
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DESCRIPTION OF YOUR DUTIES

16. LANGUAGE PROFICIENCY	READING			SPEAKING			UNDERSTANDING		
	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR	EXCELLENT	GOOD	FAIR
ENGLISH	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		
OTHER <b>French</b>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		
<b>Hungarian</b>	<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>		

BEFORE SIGNING THIS FORM CHECK BACK OVER IT TO MAKE SURE THAT YOU HAVE ANSWERED ALL QUESTIONS CORRECTLY.  
I CERTIFY that I have reviewed the statements made in this application and that they are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I further agree that if I am accepted under this program, I will follow diligently the program arranged as requested by my government and will not seek extension of the period of my program. I further agree that upon completion of my training, I will return to my country without delay and will endeavor to utilize, for the benefit of my country, the training acquired under this program.

Do. Dr. Karl Herczeg SIGNATURE OF PARTICIPANT January 20, 1959 DATE

LANGUAGE CERTIFICATION: I CONCUR IN ITEM 16 ENTRIES FOR ENGLISH ( ) YES  NO. IF "NO", EXPLAIN:

<b>Not applicable - team will be accompanied by interpreter</b>	SIGNATURE OF OFFICIAL <b>H. Louise Ramey</b>	DATE <b>March 13, 1959</b>
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