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**Appointment Letter for Independent Experts contributing to the work of the Forensic Investigations of Disaster (FORIN) Project Working Group of the Integrated Research on Disaster Risk (IRDR) Programme**

[name of the expert]

[title]

[full address]

Dear [Mr/Mrs/Dr/Prof (...name of expert...)],

The Science Committee (SC) for the Integrated Research on Disaster Risk (IRDR) Programme would like to thank you for agreeing to be an independent member of the Forensic Investigations of Disasters (FORIN) Project Working Group.

FORIN proposes an approach that aims to uncover the root causes of disasters through in-depth integrated research in accordance with Goal 4 (Reducing risk and curbing losses through knowledge-based actions.) in the IRDR Strategic Plan (2013-2017), with which FORIN's activities are aligned. The immediate goal of the FORIN working group is the review and revision of the initial FORIN template. Based on the experience of four FORIN workshops held over the last two years, FORIN co-chairs have determined that the time is now appropriate to revise and further develop the FORIN template. Toward this end, a workshop will be organised in the near future, at a place and date to be determined through consultation with all members of the Working Group.

Your work as an independent expert will support the FORIN Project Working Group with technical expertise in the promotion and application of the FORIN methodology, and assisting in conducting a review of the methodology at the appointed time. Your professional skills and knowledge will be invaluable in assisting the Working Group in achieving its goal of developing the FORIN approach and methodology further.

Your insights and expertise will be a huge asset to the Group. We thank you and look forward to your invaluable contributions.

Yours sincerely,

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Dr David Johnston  
Chair  
IRDR Science Committee

I, the undersigned, confirm that I accept the conditions set out in the current appointment letter as a member of the FORIN Project Working Group

Expert signature: \_\_\_\_\_

Place and date: \_\_\_\_\_