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**APPLICATION FOR SCHOLARSHIP FUNDING TO SUPPORT ATTENDANCE**

**AT THE WORLD CONFERENCE ON DROWNING PREVENTION 2023**

# **DELEGATE SELECTION CRITERIA**

Some funding sources restrict their scholarships to specific categories or people and will make the decisions on these restricted funds. Others offer funding on a non-restricted basis. An application form must be completed in **all** cases by the deadline specified.

Delegates must be a national of an LMIC and be living in an LMIC at the time of the conference. The list of eligible countries appears at the end of this document.

Applications will be reviewed by the WCDP 2023 Scholarships Committee. The committee is appointed by the ILS and WCDP 2023 Local Organising Committee. Applicants will be informed as soon as a decision is made with the following outcomes:

* Successful with funding in place and whether partial or full funding has been given
* Successful pending additional funding sources
* Unsuccessful

As additional funds are received, delegates who are “successful pending additional funding donations” will be notified that their status has changed to “successful with funding in place”.

Preference will be given to:

* Applicants who have been selected to present their paper as an Oral or Poster Presentation
* Applicants who can demonstrate the potential impact of their attendance at WCDP 2023

Those with a demonstrated track record of policy, programmatic and/or academic contribution to drowning prevention

Note: The Scholarships Committee will consider factors such as applicants who have never previously attended an ILS World Conference on Drowning Prevention, or who have not previously received scholarship funding previously, but this will not automatically exclude a person from consideration.

**SUBMITTING YOUR APPLICATION**

**The form must be completed and sent by e-mail to** [**wcdp2023@ilsf.org**](mailto:wcdp2023@ilsf.org) **to be received by 15 April 2023 at the latest**

The following documents must be submitted with the application form

* Two references that can attest to your work
* Proof of residence in an LMIC country
* A copy of the photo page of your passport

**WCDP 2023 SCHOLARSHIP APPLICATION**

**YOUR CONTACT INFORMATION**

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| --- | --- | --- | --- | --- | --- | --- |
| **Title** |  | | | **Gender** | |  |
| **First Name** |  | | | **Last Name** | |  |
| **Address** |  | | | **City** | |  |
| **Province/State/Territory** |  | | | **Country** | |  |
| **Home Phone** |  | | | **Work Phone** | |  |
| **Postal/Zip Code** |  | | | **Date of Birth** | |  |
| **E-mail address** |  | | | | | |
| **Mobile Telephone (including country code)** | | | |  | | |
| **Do you use WhatsApp?** | | *Yes**No* | | | | |
| **If you use WhatsApp on a different number to the one stated above, please give your WhatsApp number** | | | | |  | |
| **Skype contact name (if applicable)** | |  | | | | |
| **Have you a good level of spoken English?** | | | *Yes**No* | | | |
| **What is your main language?** | | |  | | | |

1. **Describe your involvement in Drowning Prevention work in your nation, region, and/or community, listing your main tasks and what you have achieved (max 300 words)**

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1. **Please list 3 main achievements and/or contributions you have made to drowning prevention in the past 5 years. (max 100 words)**

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1. **Please explain the potential impact of your attendance at WCDP 2023, i.e how will other attendees benefit from your attendance to present your paper/poster? (max 100 words)**

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1. **What are your personal learning goals from attending the conference? (max 100 words)**

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1. **How do you plan to contribute to drowning prevention in your country or region after returning from the conference? (Max 100 Words)**

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1. **Have you attended a previous ILS WCDP? Please indicate which if any:**

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1. **If you have attended previously, did you apply for and receive any scholarship funding via the WCDP organisers**

*Yes**No*

1. **Scholarship support requested (please give all amounts in $AUD)**
2. **I request a full scholarship, covering travel, visa, accommodation and registration costs** *Yes**No*

**If yes, please state the amount required: $AUD \_\_\_\_\_\_\_\_\_**

1. **I request a partial scholarship covering accommodation and registration costs (I have confirmed funds to cover airfares, insurance and visas)** *Yes**No*

**If yes, please state the amount required: $AUD \_\_\_\_\_\_\_\_\_**

1. **I request an amount to assist in funding my costs of attendance** *Yes**No*

**If Yes please state the amount required: $AUD \_\_\_\_\_\_\_\_\_**

1. **Declaration**

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| **By submitting this application, I recognise that my expenses for the conference may not be fully funded, and I may have to supplement the remaining expenses with my own funds. All the information I have provided in this application is true and accurate to the best of my knowledge** | |
| **Signature** |  |
| **Date** |  |

**When completed, please send this application form by e-mail by 15April 2023 to:** [**wcdp2023@ilsf.org**](mailto:wcdp2023@ilsf.org) **– include “Scholarship Application” in the subject line.**

**Ensure that you send all supporting documentation in electronic format with your application before the deadline**

**Eligible countries**

Afghanistan, Albania, Algeria, American Samoa, Angola, Antigua and Barbuda, Argentina,   
Armenia, Aruba, Azerbaijan, Bahamas, Bangladesh, Barbados, Belarus, Belize, Benin, Bermuda, Bhutan, Bolivia, Bosnia and Herzegovina, Botswana, Brazil, British Virgin Islands, Burkina Faso, Burundi, Cambodia, Cameroon, Cape Verde, Cayman Islands, Central African Republic, Chad, Chile,  
Colombia, Comoros, Congo-Brazzaville, Congo-Kinshasa, Cook Islands, Costa Rica, Côte d'Ivoire, Cuba, Czech Republic, Djibouti, Dominica, Dominican Republic, Ecuador, Egypt, El Salvador, Equatorial Guinea, Eritrea, Estonia, Ethiopia, Fiji, Gabon, Gambia, Georgia, Ghana, Grenada, Guam, Guatemala, Guinea, Guinea Bissau, Guyana, Haiti, Honduras, Hungary, India, Indonesia, Iran, Iraq, Jamaica, Jordan, Kazakhstan, Kenya, Kiribati, Korea North, Kyrgyz Republic, Laos, Latvia, Lebanon, Lesotho, Liberia, Libya, Lithuania, Macau, Macedonia, Madagascar, Malawi, Maldives, Mali, Malta, Mauritania, Malaysia,  
Marshall Islands, Mauritius, Mayotte, Mexico, Micronesia Federal States, Moldova, Mongolia, Montenegro, Morocco, Mozambique, Myanmar, Namibia, Nauru, Nepal, Nicaragua, Niger, Nigeria, Niue, Northern Marianas Islands, Oman, Pakistan, Palau Islands, Palestine, Panama, Papua New Guinea, Paraguay, Peru, Philippines, Puerto Rico, Rwanda, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Samoa (Western), Sao Tome and Principe, Senegal, Serbia, Seychelles, Sierra Leone, Slovak Republic, Slovenia, Solomon Islands, Somalia, South Africa, South Sudan, Sri Lanka, Sudan, Suriname, Swaziland, Syria, Tajikistan, Tanzania, Thailand, Timor-Leste, Togo, Tonga, Trinidad and Tobago, Tunisia, Turkmenistan, Tuvalu, Uganda, Ukraine, Uruguay, Uzbekistan, US Virgin Islands, Vanuatu, Venezuela, Vietnam, Yemen, Zambia, Zimbabwe.

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| **Application Checked** | *Yes**No* |
| **Number of Oral Presentations and Poster Displays for this applicant** | **\_\_\_ Oral \_\_\_ Poster** |
| **Applicant is from an LMIC** | *Yes**No* |
| **Application is for full funding** | *Yes**No* |
| **Application is for partial funding** | *Yes**No* |
| **Decision of the Scholarships Committee** | * Successful with funding in place   *Yes**No*   * Successful pending additional funding sources   *Yes**No*   * Unsuccessful   *Yes**No* |
| **Funding amount approved** |  |
| **Date of Decision** |  |
| **Date notified to applicant** |  |