**FIP Health and Medicines Information Section**

**Stipend Application Form 2019**

**What is the FIP Health and Medicines Information Section (HaMIS) Stipend?**

Each year the Health and Medicines Information Section offers a stipend to financially support pharmacy students, pharmacists or pharmaceutical scientists from low and middle income countries to attend the FIP World Pharmacy Congress.

**What is the value of the FIP HaMIS Stipend?**

The maximum support for one recipient is 1000 Euros towards travel and accommodation costs in addition to the Congress registration fee being funded.

**Who can apply?**

Pharmacy students, pharmacists or pharmaceutical scientists who live, work or study in a low or middle income country (as classified by the World Bank). **The applicant should be working or be involved in research in the area of medicine, disease or health information.** Preference will be given to first-time FIP attendees. Applicants who have previously received financial support from FIP may apply, but funding will only be awarded in exceptional circumstances.

**How can applications be made?**

Applications should be made via email to the Health and Medicines Information Stipend Coordinator: Lindsay McClure (Lindsaymcchome@gmail.com)

The application should be in English. The application consists of:

* This application form. All sections must be completed in English;
* A copy of any abstract(s) submitted to the FIP Congress for consideration (if applicable).

**What are the deadlines?**

The completed application, signed by the applicant, must be received by **1st** **April 2019**. An email acknowledging receipt of your application will be sent.

**How is the FIP HaMIS section stipend awarded?**

The applications that meet the Health and Medicines Information Section’s objectives will be reviewed by members of the HaMIS Stipend Evaluation Committee who will make recommendations to the HaMIS Executive Committee. The HaMIS Executive Committee will make the final decision on the granting of the Health and Medicines Information Stipend. The HaMIS Executive Committee’s decision will be final and not subject to appeal. No reason for failure to award a Stipend will be given. All applicants will be advised of the HaMIS Executive Committee’s decision once it has been made.

**What about successful applicants?**

1. Successful applicants will be advised of the registration and reimbursement process when they are awarded the stipend.

**2.** Successful applicants are required to write a brief report (one or two pages) on their participation in the Congress for publication in the Section’s newsletter, Info-Link. This report must be submitted within 60 days of the FIP Congress.

**Submission details:**

Applications should be sent, **by e-mail**, to: Lindsay McClure, HaMIS Stipend Co-coordinator

Lindsaymcchome@gmail.com

**Health and Medicines Information Section Stipend Application Form**

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| **Application Form (this form must be completed in English)** |
| Title: |  |
| Given name(s): |  |
| Family Name: |  |
| Gender: | Male [ ]  | Female [ ]  |
| Date of Birth: |  |
| FIP Membership Number: (if applicable) |  |
| Professional occupation: |  |
| Street address: |  |
| Area code: |  | City: |  |
| Region: |  | Country: |  |
| Email: |  |
| Telephone: |  |
|  |
| Have you attended an FIP congress before? If yes, which year(s)? |
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| Have you received financial support from the Health and Medicines Information Section or any other Sections of FIP before? If yes, please provide details |
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| Please tell us how your attendance at FIP would be of benefit to (a) your current employment and/or to your research project; and (b) how it might improve the general pharmacy practice, and/or science in your country of origin. ( maximum 500 words)  |
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| Please provide a statement of what you would aim to achieve should you attend FIP and how your involvement would contribute to the Health and Medicines Information Section (maximum 250 words) |
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| Travel plan (to FIP Congress) and total estimated budget in Euros. (Note, the HaMIS will arrange registration on behalf of the recipient; the stipend will be reimbursed against travel/accommodation receipts after the congress).  |
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| Name and email address of an individual that would be able to provide a reference to confirm that the applicant’s circumstances comply with the stipend conditions (e.g. a supervisor, manager, employer, head of school etc.). A reference will only be requested if a candidate has been selected for award of the stipend. |
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| Curriculum Vitae (CV) (no greater than two pages; can be attached as a separate file). Please include current affiliation with FIP (if any). |
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**Signature**

By signing this application the applicant agrees and understands:

1. All information contained in this application is truthful and accurate to the best of your

knowledge.

2. The funds granted are to be used for the attendance at the FIP Congress as described above.

3. In the event of being awarded the stipend, the applicant is obliged to submit a final

report as detailed in the conditions.

I declare that I have read and understood the stipend conditions and agree that the decision by the Executive Committee is not subject to appeal.

|  |  |
| --- | --- |
| Applicant’s name: |  |
| Signature: |  | Date: |