



**IVI's 23rd International Vaccinology Course
FELLOWSHIP APPLICATION FORM SAMPLE
2-6 September 2024**

IVI provides fellowships to people from low- and middle-income countries who are otherwise unable to attend the vaccinology course. A select number of fellowships are competitively awarded to individuals with financial need, leadership potential, and who have made contributions to public health in their country. The fellowships are an essential component of the course, reflecting IVI's mission and values.

Please note applications to this fellowship must be submitted online at the following links:

- **For applicants from North and South America, Europe, Asia, and Australia/Oceania:**
<https://www.surveymonkey.com/r/PROHQXC>
- **For applicants from Africa:** <https://www.surveymonkey.com/r/5TZH75H>

This form is being made available for applicants to familiarize themselves with the content of the application and to prepare their answers and documents to submit online through the links above.

Application Form Instructions:

- All relevant information should be included on this form and be submitted one time per applicant.
- Please note that information entered can be adjusted later once the form is complete.
- For ease of filling in, applicants may wish to prepare their answer in a separate document.
- Completion of the application is estimated to take between 30 minutes to 1 hour.

We expect to announce results from the fellowship selection between **30-31 May 2024**.

If you have any questions, please email ivivaccinology-ap@ivi.int.

PERSONAL INFORMATION

Family name*		First name (including middle names)*	
Current address details*			
Telephone number*		Email address*	

Nationality		Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to say	
Any pre-existing medical condition(s) we should be aware of and can help accommodate? <i>(leave blank if not applicable)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please describe		
Dietary restrictions (if applicable)				
Emergency contact name & country*			Tel	Email
Have you previously applied to IVI's Vaccinology Course Fellowship?*	<input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>If yes, please state which year</i>				
How did you hear about the IVI Vaccinology Course?*	<ul style="list-style-type: none"> • Social Media (Facebook, Twitter, LinkedIn...) • IVI website/newsletter • Through a colleague/friend • Other _____ 			
Are you currently involved in a project in collaboration with IVI/funded by IVI? *	<input type="checkbox"/> Yes <input type="checkbox"/> No			
<i>If yes, please provide details</i>				

EDUCATION Qualifications (start with most recent and include up to 3)*

University/school (given the name of city, country)	Year		Field	Degree Title	Degree Name
	From	To			

PRESENT AFFILIATION(Choose ONE)*

<input type="checkbox"/> Academia	<input type="checkbox"/> Commercial
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<input type="checkbox"/> Non-profit	<input type="checkbox"/> Hospital
<input type="checkbox"/> Government Institution	
<input type="checkbox"/> International / UN Agency	
<input type="checkbox"/> Post-Doc/fellow/student	
<input type="checkbox"/> Other, specify: _____	

PRESENT AFFILIATION IN DETAIL*

Name of institution /company	Institution/company website	Location	Year start	Job Title	Field

3 RELEVANT PAST EXPERIENCE (start with most recent)*

Name of institution/company	Institution/company website	Location	Year start	Year end	Job Title	Field

PUBLICATIONS LIST (MAX 5) Please provide academic reference of up to 5 relevant publications if available.

1.
2.
3.
4.
5.

MOTIVATION

- Please elaborate on your motivation and interest to attend this Vaccinology Course (*500 words maximum*). *
- Which topics or issues in vaccinology are of most interest to you? Please ensure to refer to specific examples (*350 words maximum*). *

- What are your personal and professional expectations of the Vaccinology Course? (350 words maximum). *

EXPERIENCE

- Please describe your relevant experience in vaccinology and highlight specific achievements (500 words maximum). *
- How will this course be helpful to you to advance your knowledge and career in the field of vaccinology? Please describe the impact that attending this course would have on your work, institution and overall career (500 words maximum).*
- The course is provided in English and participants are expected to possess a good command of the language in order to attend. Please provide evidence of your command of the language including previous courses or degrees completed in English or work projects conducted in English (250 words maximum). *

POSTER PRESENTATION

Fellows will present a **poster on a research or programmatic topic pertaining to their work in vaccinology (past or current)**. The IVI Fellowship Selection Committee will request a Zoom/Teams call only for short-listed applicants.

- Please indicate the title of your poster. *
- **[FILE UPLOAD]** Please upload an abstract of your poster in PDF format. The use of figures is encouraged. *
2 pages maximum (Times New Roman, Font size 12). Only PDF files are supported.

ADDITIONAL ATTACHMENTS

[FILE UPLOAD] CV: please provide an up-to-date version of your CV.

Please note CVs should not exceed 2 pages. Bioskteches are also acceptable. Please ensure the file title contains your name.

[FILE UPLOAD] Recommendation Letters: please provide two letters of recommendation from an institutional head, mentor or prior colleague. Please note letters of recommendation must highlight the applicant's relevant experience and suitability to attend this course.

Recommendation letters should not exceed one page (Font 12, Times New Roman). Please ensure the file title contains your name.

CONSENT

By ticking this box, I certify the information I provided on and in connection with this form is true, accurate and complete. I understand that any false statements may be grounds for disqualification from the fellowship.

By ticking this box, I agree to comply with COVID-19 regulations in place during the full attendance of the course.

By ticking this box, I agree to my details being used for the purposes of selection of the fellowship recipients. The information will only be accessed by necessary IVI staff. I understand my data will be held securely and will not be distributed to third parties. I have a right to change or access my information.

