



Bursary Programme for ILDS Members

The 2nd ILDS World Skin Summit is an opportunity for the leadership of ILDS Member Societies to come together to consider and develop strategies to improve skin health at local, national, regional and global levels.

The ILDS has a global reach and is committed to encouraging the participation of Member Societies from all world regions. It aims to support Member Societies that would otherwise not be able to attend the Summit through the bursary programme details below.

The programme aims to identify and support representatives from Member Societies who would benefit from attending the Summit and have demonstrated a commitment to contributing to the work of the ILDS; such as the ICD-11 Review, Global Psoriasis Atlas, World Skin Health Day campaign, NTDs or the IFD. Priority will be given to representatives from Member Societies in resource poor regions.

Bursary applicants can apply for an award of up to either US\$500 or US\$1000 to go towards the costs of attending the Summit. The bursary fund is limited and all decisions will be made subject to available funding. Unsuccessful applicants will be placed on a waiting list.

Please note that Member Societies must meet the following criteria to apply:

- Are not able to fully support at least one representative to attend the Summit.
- Have no outstanding Membership Fees.
- Have submitted a completed *'Information Update Form'* for 2018.

A bursary will primarily be awarded on successful response to the following:

- Motivation – describe why you are interested in attending the Summit
- Engagement – describe how you are planning on being involved in developing, delivering or supporting the Summit.

The deadline for bursary applications is Friday 23 February 2018.



ILDS Bursary Application Form

MEMBER SOCIETY REPRESENTATIVE DETAILS	
Member Society Name:	
Representative Name:	
Position within Society (e.g. President):	
Email:	
Phone:	

MOTIVATION
What are your main interests in attending the Summit? (100 words)
How would participating in the Summit contribute to your Society's work? (100 words)

ENGAGEMENT
How has your Society been involved with or provided support to ILDS' work/projects/events? (150 words)
How would you contribute to the Summit in the lead-up, during and following the event; for example, writing an article for the ILDS Newsletter? (150 words)

Please indicate the level of bursary award for which you are applying:

US\$500

US\$1,000

If you are successful in your application for an ILDS Bursary how will you fund the remaining cost of your travel and accommodation for the Summit?

Support from your Society (please provide details below)

Support from other funding sources (please provide details below)

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Please note:

Your application will not be considered if your Society's ILDS Membership Fees are outstanding and we have not received your Society Information Update Form for 2018.

This form has been completed with the full authority of the officers of the applying Society.

Name:

Signature:

Date:

Please return the completed form by email to office@ilds.org by Friday 23 February 2018



Terms and Conditions for ILDS Bursary Programme Recipients

This document sets out the terms, conditions and requirements for bursary recipients for the ILDS World Skin Summit 2018. Please read this carefully, as it contains important information that recipients will need to follow.

Please sign and return to office@ilds.org by 23 February 2018.

1. The ILDS Secretariat is not responsible for booking or confirming any accommodation or flights.
2. Any cancellations, such as delegates being unable to attend the Summit, will need to be done in good time so that the bursary can be made available to the next person on the waiting list.
3. The ILDS will provide some refreshments and meals during the Summit between 10-12 June (Please see programme for further details). No meals outside of these times or locations will be covered or refunded, this includes any in-room dining or alcohol ordered.
4. The ILDS will provide transport for any activities that are included within the Summit Programme. Transfers between the airport and hotel are the delegate's own responsibility.
5. The ILDS will not cover any charges for early check in or late checkout. Negotiations and any charges to change this must be covered by delegates themselves directly with the hotel.
6. The ILDS Bursary Programme is subject to limited funds and therefore ILDS will only provide an award of up to US\$500 or US\$1000. **Any remaining costs, including in-country ground travel (your home country and Vietnam), daily stipend, travel insurance, visa costs, flights and accommodation will not be covered by the ILDS.**
7. It is the delegate's responsibility to ensure that all travel documents and requirements (such as passports and visas for entry to Vietnam) are valid and in order. **All visas need to be successfully granted for the ILDS to transfer the Bursary Award amount.** The ILDS will not cover any additional costs to support entry or exit from Vietnam for the Summit.
8. It is strongly advised that the delegate takes out adequate personal insurance to cover their attendance at the Summit and their travel. The ILDS will not cover any costs incurred in case of an emergency, as travel is at delegates' own risk.
9. The ILDS' support for your attendance of the meeting requires that you attend the Summit Programme in full, we value your active engagement and participation throughout the meeting. The Welcome Reception takes place on the evening of Sunday 10 June, and we expect engagement with the programme through to lunch on Tuesday 12 June.
10. The ILDS requires all bursary recipients to formally share their experience of the Summit after the meeting. This can take the form of an article for the ILDS Newsletter, feature article on the ILDS website, video testimony, etc. The ILDS Secretariat will discuss this with each recipient in more detail before the Summit. Please ensure that this is completed and submitted to the ILDS by 16 July 2018.

I agree to the terms and conditions outlined above.

Name:

Signature:

Date: