## Hong Kong Jockey Club Disaster Preparedness and Response Institute (HKJCDPRI) Overseas Training Fellowship for Emergency Medicine (EM) / Emergency Medical Services (EMS)

APPLICATION FORM

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	sonal details				1		
First and m (English):	iddle name			Last name (Englisl	h):		
Chinese na	me (if any):			Title: (Dr/Mr/Mrs/N	ls)		
Nationality:				Current city of Residence:			
Are you a lead		☐ Yes	□ No	Are you eligible to work in Hong Kong	g?	□ Yes	□ No
Part 2. Cor	ntact details						
Primary email address:				Additional email address:			
Phone number:				Mobile Number:			
Correspond address:	dence						
D: 10 E1							
degrees/ce	ll details in ch ertificates/diple imary/second	nronological order. Givonas. If the institution arry schools(s). Includ	is not in Hong	Kong, please state t	he city	and count	
Dates (M	IM/YYYY)	Name of Ins	titution	Qualification	Ma	jor(s) / Fiel	d(s) of
From	То			Obtained	Study		

Dates (MM/YYYY) Na		lame of Institution Qua		lification	Major(s) / Field(s) of		
From To		Ob			tained	Study	
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Part 4 Fmr	l ployment Rec	ord					
-			recent employme	nt, provic	le preci	se details o	f your responsibilities and
							Give particular attention
proposed.)	es wnich relat	e to your qu	uaiiiications ior tni	s reliows	nip or to	o your need	for the further study
, ,	nt Employm	ent	From:			То:	
(MM/YYYY	)						
Job Title/ P	osition held:						
_							
Name of Er	mployer/ Orga	anisation:					
Type of Employment:			□ Full-time □ Part-time □ Others:				
Brief summary of your responsibiliti		L es/ specific duties	•				
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Previous Employment		From:			To:		
(MM/YYYY)							
Job Title/ P	osition held:						
Name of Er	mployer/ Orga	anisation:					
Type of Employment:			☐ Full-time	□ Part	-time	☐ Oth	ers:
Brief summary of your responsibilities/ specific duties:							
Direct Summary of your responsibilities, specific duties.							

Previous Employment (MM/YYYY)		m:		То:		
Job Title/ Position held:						
Name of Employer/ Organisation:						
Type of Employment:	□F	Full-time		☐ Others:		
Brief summary of your responsibilities	es/ sp	ecific duties:				
Part 5. Information of the proposed				ered by universities or organisations.		
	ble co	ourses that s/	he wishes to at	tend, in order of preference. Detailed		
Composition of the proposed		☐ One stud	y course	☐ Two study courses		
fellowship training:		☐ One stud	ne training placement			
(please choose one only)		☐ One training placement				
1) Course/ Programme period: (DD/MM/YYYY)		From:		То:		
Field or subject of study course/ placement:						
Full name of the course/ programme	e:					
Full name of the course/ programme provider:	е					
Learning/ Training objectives of the study course/ placement:						

2) Course/ Programme period: (DD/MM/YYYY)	From:	То:				
Field or subject of the second study course/ placement:						
course, placement.						
Full name of the second course/ programme:						
Full name of the second course/ programme provider:						
Learning/ Training objectives of the stud	y course/ placement:					
Don't C. Doot followship commitmeents						
Part 6. Post-fellowship commitments (If not enough space provided, supplemental)	entary sheet(s) can be attach	ed.)				
Explain your plan of commitments to HKJCDPRI on your return after the completion of fellowship. Indicate in details the service or activity you plan to perform to bring in the knowledge and skills you acquired through the fellowship programme that would contribute the development of HKJCDPRI. Apart from the Overseas Training Fellowship Report that required to be submitted in summarising the training experience after completed the fellowship, you are requested to fulfil three tasks of commitment:						
1. Write at least one reflection/sharing article during the candidate's fellowship period and submitted it with photo(s) or picture(s) for HKJCDPRI's website and/or dissemination work.						
	Deliver at least one sharing session on how the fellowship programme and/or training experience can enhance the capacity building initiatives of HKJCDPRI within 1 year after return.					
<ol> <li>Assist HKJCDPRI and/or your working institutions in conducting at least one disaster capacity building activity by incorporating the knowledge acquired from the course(s) / placement(s) within 1 year after return.</li> </ol>						
Proposed plan for (1):						

Proposed plan for (2):
Proposed plan for (3):
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Part 7. Proposed Budget Plan to be supported by the Fellowship
(If not enough space provided, supplementary sheet(s) can be attached.)
Diagon autiling a hudget plan to identify the list of hudget items that plan to be supported by the followship
Please outline a budget plan to identify the list of budget items that plan to be supported by the fellowship.
You may want to include Tuition fee, One overseas round trip transportation, Accommodation, Insurance,
etc. This Fellowship is a Reimbursement-Based award. Sponsored items would be reimbursed under
agreed terms and provided with sufficient supporting documents. You may want to reference the
Fellowship Budgeting Guide for more details.
The maximum amount of the award is HK\$180,000 each. HKJCDPRI reserves the rights to adjust the
award amount and approve/reject the financial documents submitted.

Part 7. (continue) Proposed Budget Plan to be supported by the Fellowship							
(Reference Letter(s) should be submitted to attest the candidate's teaching, influencing and leadership abilities. One to two reference letter(s) for fellowship programme of three or less than three months; two reference letters for fellowship programme of more than three months - at least one must be obtained from his/her supervisor. Please list out the referee(s) that provided your reference letter(s).)							
Organisation/ Institution	Title/ Position	Contact email	Contact phone number				
Part 9. Applicant Declaration							
By signing the following declarations,							
I confirm that the information and documents I provided in the application of The Hong Kong Jockey Club Disaster Preparedness and Response Institute (HKJCDPRI) Overseas Training Fellowship for Emergency Medicine (EM) / Emergency Medical Services (EMS) are true and correct to the best of my knowledge.							
I acknowledge that my application and the information I submitted with this application may be accessible to HKJCDPRI, The Hong Kong Academy of Medicine and The Hong Kong Jockey Club Charities Trust.							
I acknowledge that HKJCDPRI reserves the rights to revise or adjust the programme of the Overseas Training Fellowship for EM/EMS.							
Ap	plicant Signature	Date					
	ald be submittee ence letter(s) f yship programs e list out the re Organisation/ Institution  eclarations, ion and document Response In cy Medical Se plication and to Kong Academ DPRI reserves	id be submitted to attest the candidate once letter(s) for fellowship programme of more than three is list out the referee(s) that provided Organisation/ Institution  Title/ Position  eclarations, ion and documents I provided in the ind Response Institute (HKJCDPRI) or Medical Services (EMS) are true plication and the information I submit Kong Academy of Medicine and The DPRI reserves the rights to revise or	ald be submitted to attest the candidate's teaching, influence letter(s) for fellowship programme of three or less aship programme of more than three months - at least of list out the referee(s) that provided your reference letter.  Organisation/ Institution Contact email Contact e				

[End of Application Form]