**IPSF Development Fund 2019-20**

**World Congress Event Grant Application**

# Please read the entire call carefully before completing the application form.

Every section of this application form must be completed in order to be valid. An application will only be considered if sections A, B, C, D, E, and F have been completed, the application electronically signed, and all relevant documents sent in.

Completed application forms with signatures must be submitted to the [link](https://forms.gle/XYU8gQctStD4j1v49) in **Word format** by **1 March 2020, 23:59 GMT+0.** When submitting your application, please rename the file to specify the World Congress Event Grant and your name: “**World Congress Event Grant - Insert Name**”.

# SECTION A.

# Applicant Details

|  |  |  |
| --- | --- | --- |
| **Personal Details** | | |
| Full Name | (Mr / Ms / Mrs) |  |
| Date of Birth | |  |
| Full Address | |  |
| Country | |  |
| Telephone Number | |  |
| Email | |  |
| **Passport and Visa Information** | | |
| Current Passport Number | |  |
| Valid until: | |  |
| Visa requirements | |  |
| **Study Details** | | |
| Name of School of Pharmacy where you are studying | |  |
| Address | |  |
| Email | |  |
| Degree to be received | |  |
| Total length of study | |  |
| Date of graduation (expected) | |  |

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| **IPSF Involvement**  Briefly discuss your involvement within your national association and within IPSF (Max: 400 words). | |
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| Word Count |  |

# SECTION B.

# Financial Details

**Please upload an electronic or scanned version of your Financial Status in English for the year 2019-20 in the submission link with the name WC Grant - Insert Name\_Financial in PDF format:**

a.  Proof of income, such as a pay check or statement with the amount of money received per month or per year, if applicable

b.  Proof of received scholarships, grants, or loans stating the amount of money received per month or per year, if applicable

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| **Your National Currency** |  |
| **Exchange Rate on 1 Euro (€)** |  |
| **Exchange Rate on 1 Euro (€) by Treasurer** | [To be completed by Treasurer] |

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| --- | --- | --- | --- |
| **Monthly Income** | | | |
| **Income Type** | | **National Currency** | **Euro (€)** |
| **Applicant’s Income** | |  |  |
| **Scholarship or Grant Money** | |  |  |
| **Sponsorship for Exchange** | |  |  |
| **Loans**  Please specify student or other | |  |  |
|  | From university, as deducted from tuition fees |  |  |
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| **Family allowance**  Money from family for expenses | |  |  |
| **Other sources of income**  Please specify: | |  |  |
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| **TOTAL** | |  |  |

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| --- | --- | --- | --- |
| **Monthly Expenditures** | | | |
| **Income Type** | | **National Currency** | **Euro (€)** |
| **Tuition** | |  |  |
| **Rent or housing** | |  |  |
| **Electricity, gas, water** | |  |  |
| **Phone and internet** | |  |  |
| **Food and groceries** | |  |  |
| **Books, stationery, school supplies** | |  |  |
| **Clothing, shoes, personal hygiene** | |  |  |
| **Other sources of expenditure**  Please specify: | |  |  |
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| **TOTAL** | |  |  |

Note: Living expenses are considered as necessary costs for living that are paid by the applicant personally. For example, food, accommodation, electricity fees, and study costs, but not unnecessary costs like holidays.

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| **Financial Background** | | | | |
| **Total Family Income** | **National Currency** |  | **Euro (€)** |  |
| **Sources of Family Income**  E.g. Father, mother, siblings, investments, assets |  | |  | |
| **No. of Dependents in Household**  How many family members depend on your parents’ income |  | |  | |

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| **Travel Plans Expenses** | | |
|  | **National Currency** | **Euro (€)** |
| **Estimated travel and visa expenses to attend IPSF event** |  |  |

Please complete the table below detailing your estimated travel route and the corresponding costs. Please note that only one row will need to be completed for a direct travel option. For a travel plan which involves multiple modes of transportation, each leg of the journey should be listed in a separate row. For example: Row 1: Flight Amsterdam, The Netherland to Cairo, Egypt; Row 2: Bus Cairo, Egypt to Hurghada, Egypt, and so on.

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| **Destination**  Each leg of the journey in a separate row | **Estimated Costs in Euros (€)**  Including return travel | **Route and Means of Transportation** | **Source of the Information**  Website, travel agency, etc. Please attach an electronic document if available. |
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| **Sponsorship Details**  State the names of any bodies in your country which you have already contacted for sponsorship, when you contacted them, and the results of the request(s). If no sponsors were contacted, please explain why. | | | |
| **Sponsor Name** | **Date of Contact** | **Response Received and Date of Response** | **Sponsorship Value (Euros)** |
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# SECTION C.

# Motivation Letter

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| **Detail your reasons below for applying for the grant (Max: 500 words).** Please discuss the following:  ·        What are your reasons for participating in the 66th IPSF World Congress?  ·        What do you hope to gain through participating in the 66th IPSF World Congress?    Applicants should include any additional information that may be relevant. As this section is seriously considered during the selection process, applicants are reminded of the importance of stating clear and realistic reasons for participating in the 66th IPSF World Congress, with a focus on the personal, national, and international impact this experience can have. | |
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| Word Count |  |

# SECTION D.

# Letter of Support

A letter of support, signed or stamped, from the Dean or Professor of where the applicant is studying, must be attached as a separate electronic PDF document. If the applicant is a recent graduate, a support letter may instead be obtained from an employer. Please upload an electronic or scanned version on the submission link with the name **WC Grant - Insert Name\_LetterSupport**.

**SECTION E.**

# Student Association Details

**This section is to be completed by your association’s Contact Person.**

Please note: If you wish to keep your application and financial information private, we recommend you send your CP a blank copy of this application first so they can complete this section. You can then proceed to complete the rest of the application once they have returned it to you.

1.      Is the applicant a member of your association? Yes No

2.      Is the applicant an official delegate? Yes No

3.      Are there any other people (e.g. students, graduates) from your country attending World Congress? Yes No

**ASSOCIATION’S CONTACT PERSON**

|  |  |
| --- | --- |
| Signature |  |
| Name |  |
| Name of Association |  |
| Date |  |
| Email |  |

# SECTION F.

# Signatures

**By signing this application, you declare that**

1. **The information stated above is to the best of our knowledge, complete and accurate;**
2. **In the event of any changes in the information stated above, we will notify the Development Fund Coordinator (df@ipsf.org) without delay in order to prevent the potential withdrawal of the grant (if the application is successful);**
3. **You have fully read and agree to the guidelines.**

**APPLICANT**

|  |  |
| --- | --- |
| Signature |  |
| Name |  |
| Date |  |
| Email |  |