International Federation of
CLINICAL NEUROPHYSIOLOGY

IFCN Education
Fellowship (Africa for Africans) Application Form

Introduction

The International Federation of Clinical Neurophysiology (IFCN) Education Fellowship: Africa for Africans is aimed at supporting training in clinical neurophysiology for applicants from Africa without access to similar training in their home country and who choose to pursue training at a centre within Africa.

Eligibility criteria

1. Member of an IFCN member society Check the list of IFCN affiliated societies in the website www.ifcn.info.
   OR
   Member of the International Clinical Neurophysiology Society (ICNS) for those from countries without an affiliated member society.

2. Applicants with a minimum of 2 years in core medical training (e.g. neurology, rehabilitation medicine, clinical neurophysiology) are preferred.

3. Intent to return to their country after the period of fellowship.

4. There are no age limits.

5. 5. Scope and period of training:

   a. Any field of clinical neurophysiology including general or specific/specialized techniques for which training opportunities are not available in their own country
   b. Applicants are encouraged to identify training centers within their own IFCN Chapter geographic region when possible (check the IFCN chapters geographic regions in the website www.ifcn.info).
   c. The minimum duration of training is 3 months with a maximum 1 year.

6. Candidates must contact the education mentor themselves and obtain permission for the fellowship. (The mentor will be required to complete section III of the application form)

Submission details

Deadline for submission is 30 April 2023 (date of receipt)

Please send your application to the Secretariat of the IFCN via email at info@ifcn.info.

For any enquiries, please email: Kim Zaiss, IFCN Executive Director at kzaiss@ifcn.info.

The IFCN Education Committee will make the selection of successful candidates. Applicants will be informed of the decision by 1 July 2023.

APPLICATION FORM

I. Brief CV

A. Biodata

Full name with title (e.g Professor/Associate Professor/Dr):

Mailing Address:
Date and place (city & country) of birth:
Email address:
Country of current practice:

B. Professional qualifications

Qualification	Institution	Dates

C. Postgraduate employment (current and previous: most recent post first)

Place of work	Post held	Dates

D. Professional Body Membership (please list)

E. Awards (please list, if applicable)

F. Publications in the last 5 years (please list, if applicable)

II. Proposed training programme

A. Please give details of any experience in Clinical Neurophysiology to date.
(max 100 words)

B. Please provide details of your proposed training.
(max 350 words)
Please also include the following information:

- *reasons for applying for this award, how long is the period proposed*
- *why you have chosen to do your training at the centre proposed and not one more local*
- *what has led you to choose a career that would involve clinical neurophysiology*
- *how will your proposed training impact your current practice/country*

C. How does your proposed study align with the goals of IFCN? (100 words max)
Please also include plans for future involvement and contribution towards IFCN

III. Proposed Mentor/Centre

Full Name (including title; e.g Professor/Associate Professor/Dr):

Current Position:
Address of Institution:
Correspondence Address, if different from above:

Email:

Statement in support of candidate

Please include in your statement:

- *Details of the suitability of the candidate for the training*
- *Details of your experience of supervision including numbers previously or currently supervised*
- *Proposed programme and the facilities available to support his/her training*

IV. Budget proposal (the total must not exceed USD 25000)

ITEMS	**PROPOSED BUDGET**
Living expenses: (max USD 2000/month) (please list the following with evidence of estimated cost) - Rental per month - Monthly stipend for food etc	
Travel (estimated cost of round trip/return flight) (max USD 1000)	
Institutional fee (if applicable)	
TOTAL	

Have you received or are you currently being considered for an Award elsewhere for this programme? (provide details if yes) YES ◉ NO ○