

## **WSO YSPC Brief Clinical Exchange Application Form**

**DEADLINE FOR SUBMISSION: October 30, 2019**

### **Information for Applicants**

The WSO Brief Clinical Exchange Scholarships are designed to expose young stroke professionals from medical, nursing and allied health backgrounds to best practice clinical stroke care at international centers of excellence. Five scholarships are awarded annually with maximum reimbursement of US\$2000 on presentation of receipts for travel and accommodation costs. The host institution would be expected to waive any observership fees. The duration of visit would generally be 1-2 weeks but could be longer.

Applicants should have a demonstrated commitment to stroke care through their training and current clinical roles. Young stroke professionals would generally be under 40 years of age unless there are grounds for special consideration. Those in developing countries are particularly encouraged to apply and at least 2 of the 5 scholarships are granted to applicants from developing countries. The primary purpose of the exchange should be clinical but opportunities for collaborative research may arise and are strongly encouraged. The selection panel will consider the potential benefit to the applicant and stroke patients at their institution. The host institution must have recognized status as a center of excellence in stroke care and a letter of provisional acceptance from the host institution must be provided as an attachment to the application form. If successful the applicant must provide a 500 word report on the exchange visit to the WSO prior to receiving reimbursement.

**To submit your completed application, send to: [admin@world-stroke.org](mailto:admin@world-stroke.org)**

### **Applicant details**

Title \_\_\_\_\_  
First Name \_\_\_\_\_ Surname \_\_\_\_\_  
Date of Birth (dd/mm/yyyy) \_\_\_\_\_

*Please describe reasons for request of special consideration if age over 40:*

Qualifications:

Year	Degree	Conferring Institution

**Current job title:** \_\_\_\_\_

Institution: \_\_\_\_\_

Address: \_\_\_\_\_

Country: \_\_\_\_\_

**Proposed Host Institution:**

Country: \_\_\_\_\_ Supervisor: \_\_\_\_\_

**I declare that I have fluency in the native language spoken at the host institution: Yes No**

*If no please explain why this host institution should be considered suitable*

**Current Role**

Please describe your current role as it relates to clinical management of stroke patients and the current state of stroke management in your institution.  
(max 300 words)

(Continue on next page)

**Potential benefits of Brief Clinical Exchange (60%)**

Please describe what activities would occur during the Brief Clinical Exchange and how this may improve your skills and the care of stroke patients at your institution. (maximum 500 words)

(continue on next page)

**Contribution to Training and Engagement (20%):** please describe any teaching/training of other health professionals and community engagement that you have undertaken related to stroke

**Contribution to the Scientific Community (20%):** please list any publications and presentations related to stroke that you have authored and any awards you have received:

**Proposed budget:** (maximum reimbursement US\$2000)

Item	Cost	Justification/Comments

*one voice*  
One World Voice for Stroke

**Supervisor's consent**

I support the applicant in this application and will allow relevant leave from regular duties in order to undertake the Brief Clinical Exchange if the application is successful

Signature \_\_\_\_\_  
Name \_\_\_\_\_  
Title \_\_\_\_\_ Date \_\_\_\_\_

**Applicant declaration:**

I declare that all details in this application form are true and correct. I declare that, if this application is successful, I will provide a 500 word report on the brief clinical exchange to the WSO as a condition of reimbursement.

Signature \_\_\_\_\_  
Name \_\_\_\_\_  
Date (dd/mm/yyyy) \_\_\_\_\_

**Attachments:** Letter of provisional acceptance from the proposed host institution

