

## IPA Child Health Emerging Leaders Program (Child HELP) Application

Name of Applicant:

Address / Country:

Phone Number and Email:

IPA Member Organization Affiliation:

Name of Potential Sponsor from National Society:

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1. Please indicate whether you are available to participate in the inaugural Child Help Training Session in Panama City, Panama – March 16-18, 2019

- Yes  
 No

2. Please complete and provide the following:
  - a. Letter of support from one of the leaders of your pediatric society.
  - b. Personal statement (max 250 words) explaining what you hope to gain from the program, ways in which leadership training will help you advance child health, and any preliminary ideas for an individual leadership project.
  - c. Attach brief bio-sketch and CV, including education, training, current work status, and interest in developing leadership capacity

*Please email your completed form and supporting documentation  
by **28 January 2019** to: [office@ipaf-world.org](mailto:office@ipaf-world.org)*