



ITP 322/3 – Social Protection for Sustainable Development
East/Southern Africa Region 10–16 June 2020,
Sweden 2–13 November 2020,
East/Southern Africa Region May/June 2021

FOR OFFICIAL USE OF THE SWEDISH EMBASSY

Received application by administration:

Sign _____ Date _____

Comment, see attached note

Official nomination not necessary in this country

APPLICATION FORM (TYPEWRITING OR BLOCK LETTERS)

The _____ Country _____
(name of nominating organisation/institution/company)

nominates _____
(name of applicant)

To the Programme on Social Protection for Sustainable Development (East/Southern Africa Region 10–16 June 2020, Sweden 2–13 November 2020, East/Southern Africa Region May/June 2021).

Reason for nomination (obligatory), including how your organisation intends to use the training strategically (use additional page, if necessary)

additional page(s), indicate number _____

We are aware that if this person will be selected for this training our organisation will release the person for all parts of the programme and also support him/her when working with the project. Note that no funding of the project is provided by the organisers.

Date _____ Signature of nominating organisation/institution/company _____

Name of nominating manager _____ Telephone number _____

E-mail address _____

If the immediate superior of the applicant is another person than above please state here:

Name of the applicants superior _____

E-mail _____ Telephone _____

(When necessary/applicable)

The Nomination is approved by (name of authorising authority) _____ in accordance with local rules.

Date _____ Signature of authorising authority _____

The Application should be submitted to the appropriate Swedish embassy/consulate at the latest on the **28th of February 2020**. The embassy/consulate will forward it to the programme secretariat.

If there is no appropriate Swedish embassy/consulate in the country. Please submit application form directly to secretariat (contact information below) at the latest on the **28th of February 2020**. Please, e-mail a copy of your application to ITP@epri.org.za by **28th of February 2020**. Applications received after this date will not be considered.

EPRI – Economic Policy Research Institute
E-mail: ITP@epri.org.za
Phone: +27 82 550 4055

Arbetsförmedlingen – Swedish Public Employment Service
E-mail: julia.kusoffsky@arbetsformedlingen.se
Phone: +46 771 60 00 00

PHOTO
(Please do not glue.
Attach with Staple)

PERSONAL HISTORY

1. First name (underline name by which formally addressed)	Second name	Family name (surname)		
2. Office address		3. Telephone (to office). (country code/area code)		
		Mobile phone:		
		E-mail (obligatory):		
4. Home address		5. Telephone (home) (country code/area code)		
		Mobile phone:		
		E-mail (home):		
6. Nationality		Date of birth	Day	Month
				Year
7. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female				
8. Name and address of person to be notified in case of emergency (incl. country code/area code)				
Name _____		E-mail _____		
Address _____		Telephone _____		

9. Education (start with last attended institution and work backwards)			
Name of institution and place of study	Major fields of study	Years of study from – to	Degrees
10. Previous residence in foreign country in relation to applicant's professional or study interest			
Have you participated in any training programme in Sweden before?			
<input type="checkbox"/> yes <input type="checkbox"/> no Name of programme, year _____			

EMPLOYMENT RECORD

In order that your application may be complete, please give details of your duties and responsibilities for each of the posts you have occupied.

A. Present position

Title of your post	Description of your work, including your personal responsibilities
Years of service: from-to	
Type and level of organisation	
Name of supervisor (if any)	
Name and address of employer _____	
Type of organisation: <input type="checkbox"/> Government <input type="checkbox"/> NGO <input type="checkbox"/> Academic <input type="checkbox"/> Private	

B. Previous position

Title of your post	Description of your work, including your personal responsibilities
Years of service: from-to	
Type and level of organisation	
Name of supervisor (if any)	
Name and address of employer	

Please state briefly the reason for applying to this programme. Please also describe briefly how you and your work can contribute to the change programme for your country (as outlined below). Use supplementary pages if needed.

Ethiopia: Ethiopia's ITP Change Programme, the Nutrition Sensitive Social Protection Initiative, aims to reduce malnutrition rates by improving linkages between the Productive Safety Net Programme (PSNP) and nutrition initiatives and other complementary programmes, including water and sanitation (WASH) interventions. The programme will involve strengthening inter-sectoral coordination, creating opportunities for asset transfers and building human resource capacity. The change programme will employ evidence building approaches that continuously monitor activities and results, with feedback loops that enable learning-by-doing mechanisms to refine the delivery mechanisms and continually improve nutrition outcomes.

Kenya: Kenya's ITP Change Programme, the Family Resilience Initiative, aims to strengthen resilience in cash-transfer recipient households by extending developmental support to the youth in participating households. The programme will target children aged 12 to 18 years old in beneficiary families with support including improved education opportunities, asset transfers, training and mentorship, referrals and linkages to other developmental initiatives. The change programme will pilot the model intervention in a progressively expanding number of counties, employing robust evidence-building approaches to continuously monitor and improve results.

Uganda: Uganda's ITP Change Programme, the Integrated Programme for Increasing Coverage of Social Protection, aims to strengthen all individuals' security and resilience to socio-economic risks and shocks. The objectives focus on expanding coverage of social protection programmes among three key population groups: older persons (sixty-five years and above), adolescents and informal sector workers. For older persons, the change programme will build political commitment, strengthen legislative mechanisms and build evidence to scale up the SAGE programme. For adolescents, the change programme will integrate services to better ensure educational opportunities for adolescent girls and livelihoods opportunities for young women. The change programme will also build linkages and innovate instruments to ensure the social protection system reaches informal sector workers.

Tanzania: Tanzania's ITP Change Programme aims to build the nutrition sensitivity of the country's social protection system in order to reduce malnutrition for children under five years in the poor and vulnerable households participating in the Productive Social Safety Net (PSSN) Programme. Capacity development initiatives will strengthen the capabilities of government institutions scaling up the existing Equity Nexus initiative providing PSSN participants access to community-based nutrition services. The programme will promote behaviour change communication (BCC) on nutrition and shared gender roles to improve nutrition status of PSSN beneficiaries. The change programme will incorporate robust learning-by-doing evidence building approaches to continually improve the effectiveness of the government's integrated nutrition initiatives.

Zambia: Zambia's ITP Change Programme aims to strengthen integrated social protection service provision to more effectively reduce multi-dimensional poverty and vulnerability. The change programme will promote integration employing cash "plus" approaches and the Single Window Service delivery system. Over the five-year period, the change programme will apply this integrated systems approach to (1) strengthening nutritional outcomes in the "first thousand days" window, (2) improving educational opportunities for adolescent girls and livelihoods opportunities for young women, and (3) supporting climate adaptation and shock resilience.

LANGUAGE REQUIREMENT

English certification does not have to be carried out if any of the following is applicable:

- English is my mother tongue or official language of the country.
- English is my working language (please enclose statement from management)
- Carried out higher academic education (min 6 months) where English was the medium of instruction (please enclose copy of certificate)

CERTIFICATE OF THE ENGLISH LANGUAGE

Not required if any of the conditions at the bottom of page 3 apply

Name of candidate _____	
ABILITY TO UNDERSTAND <input type="checkbox"/> Understands without difficulty when addressed at normal rate <input type="checkbox"/> Understands almost everything, if addressed slowly and carefully <input type="checkbox"/> Requires frequent repetition and/or translation of words and phrases	ABILITY TO SPEAK <input type="checkbox"/> Speaks fluently and accurately and is easily intelligible <input type="checkbox"/> Speaks intelligibly, but is not fluent or altogether accurate <input type="checkbox"/> Speaks haltingly, and is often at a loss for words and phrases
ABILITY TO WRITE <input type="checkbox"/> Writes with ease and accuracy <input type="checkbox"/> Writes slowly and with only a moderate degree of accuracy <input type="checkbox"/> Writes with difficulty and makes frequent mistakes	READING ABILITY AND COMPREHENSION <input type="checkbox"/> Reads fluently, with full comprehension <input type="checkbox"/> Reads slowly, but understands almost everything <input type="checkbox"/> Reads with difficulty, and only with frequent recourse to a dictionary
Language test administered by: _____	
Title: _____	
Address and Telephone: _____	
Date and signature: _____	

MEDICAL STATEMENT

<input type="checkbox"/> I do not have any infectious diseases (for example tuberculosis or trachoma) or any other illnesses which could present risks to persons that I will come in contact with.
<input type="checkbox"/> I do not have any medical conditions which prevent me from carrying out training away from home.
<input type="checkbox"/> I am in good health and enjoying full working capacity.
<input type="checkbox"/> If you have a disability please state. (This box is for information only and will not affect the selection of candidates)
Comment: _____ _____ _____ _____

Information to all applicants according to the General Data Protection Regulation (GDPR):

Once confirmation has been given that your application has been accepted, the personal information that you have given in this application will be used by the Programme Organiser in administering the Programme. Your personal data will also be available to Sida for internal use and for alumni purposes, and may also be disclosed to the public in accordance with the principle of public access to information in Sweden. You are entitled to access your personal data and can always request your personal data to be corrected, erased or restricted. For more information about GDPR, please visit www.sida.se or ask the programme organizer for support.

Signature of Applicant

I certify that my statement in answer to the foregoing questions is true, complete and correct to the best of my knowledge and belief.

If selected as a participant I undertake to spend the time during the period of the programme as directed by the programme management.

Date _____

Signature of Applicant _____

If you are selected, you will be notified by e-mail. **Please confirm your acceptance to attend by e-mail.**