**Application form for IPWSO 2024 Conference Fund**

***Sponsored by Friends of IPWSO (USA)***

In order to share knowledge about Prader-Willi syndrome (PWS) around the world, IPWSO is offering grants to individuals or organisations who wish to organise local, national, or regional Prader-Willi syndrome workshops, meetings, or conferences virtually or in person (if possible). This scheme is sponsored Friends of IPWSO (USA), a non-profit organisation.

The expectation of the scheme is that the knowledge gained at the meeting will be used to help people with PWS in the country/region. It is expected that each meeting will include at least one speaker who is a professional with expertise in relation to PWS.

Successful applicants must be willing to be publicly identified by IPWSO and Friends of IPWSO (USA) as having received funding (e.g., on IPWSO and Friends of IPWSO (USA) websites and in various publications).

Applicants must also be willing to prepare a brief report on the conference within 6 months of the end of the conference and to provide additional feedback 12 months after the workshop/conference has concluded. Both reports may be made public by IPWSO and Friends of IPWSO (USA).

In this 2024 round, applicants may apply for up to $15,000. However, it is more likely that a successful applicant will receive partial funding for an event.

Priority will be given to applicants who:

* have previously supported people with PWS;
* present a coherent plan to build on the knowledge gained at the conference to improve the lives of people with PWS and their families in the country/region;
* have not previously received conference or workshop funding from IPWSO;
* live in countries in which PWS conferences do not currently take place and where there is little awareness of PWS.

Applications will be assessed in terms of:

* applicants’ past experience of supporting people with PWS;
* applicants’ plans to continue to support people with PWS after the workshop/conference concludes;
* the reasonableness of the amount claimed;
* the importance of providing support in this country/region;
* the number of people expected to benefit from the event;
* the consideration, where reasonable and possible, of reducing the environmental impact of an event.

The closing date for the receipt of applications is 28 February 2024. The successful applicant/s will be chosen by the IPWSO board whose decision will be final. Both successful and unsuccessful applicants will be informed by a member of the Conferences and Workshops group.

**To apply, please submit a completed application form by email to** **nmcnairney@ipwso.org**.

All applications must be in English, and amounts stated in USD. IPWSO reserves the right to exclude applications that are incomplete, not in English and/or do not quote costs in USD.

For any queries regarding this application, including suggestions for international speakers, please contact IPWSO at nmcnairney@ipwso.org

Please complete in black font

**Applicant details**

Name:

Email Address:

Telephone Number:

Street Address:

Are you a relative of someone with PWS? If so, indicate your relationship with that person (e.g., parent).

If you are not a relative of someone with PWS, indicate your job title and briefly explain your interest in PWS.

What is your first language?

Will it be possible to have translation from/to English during the presentations?

**Applicant’s role in supporting people with PWS to date.**

Identify the PWS association with which you are affiliated (if any). If none, state the number of families and professionals you are in contact with who stand to benefit from this event.

Briefly describe your current and past roles in this PWS association (if any).

List any previous PWS meetings or events you have organised giving details of their dates and locations (if any).

Briefly describe any previous work you have done/are doing to support people with PWS.

Briefly describe how much information and what services are available to people with PWS and their families in your country, and the numbers diagnosed with the syndrome (if known).

 **Complete the shaded column to provide more information about the meeting for which funding is being sought.**

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| --- | --- |
| 1. **Proposed event title**
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| 1. **Proposed location (country, city)**
 |  |
| 1. **Language of event. (indicate if translation into other languages will take place)**
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| 1. **Rooms required/**

**If event is to be virtual, would you need help with web hosting?** |  |
| 1. **Estimated number of people with PWS who will attend**
 |  |
| 1. **Age range of known people with people with PWS in your region**
 |  |
| 1. **Estimated number of family members of people with PWS who will attend**
 |  |
| 1. **Estimated number of professionals who will attend**
 |  |
| 1. **Disciplines of professionals who will attend**
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| 1. **Geographic area from which attendees are expected to come.**
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| 1. **Proposed event dates and duration**
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| 1. **Main goals (what do you want to obtain with this event)**
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| 1. **Content and methods**
 |  |
| 1. **Target group(s)**
 |  |
| 1. **What type of speaker would be most appropriate for the workshop/conference?**
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| 1. **How will the knowledge shared at the event be saved and distributed?**
 |  |
| 1. **To build on the knowledge gained at the event, what follow up activities are planned over the next five years? (Sustainability)**
 |  |
| 1. **Potential** **Risk (financial, physical etc.) to our staff, volunteers and those in receipt of our support and safeguarding.**
 |  |
| 1. **What measures will be put in place to ensure the safety of children and vulnerable adults?**
 |  |
| 1. **IPWSO’s commitment to reducing environmental impact?** IPWSO is committed to taking the environmental impact of conferences and workshops into consideration when awarding grants. What considerations are you able to take in delivering your event? (For example, have you asked your suppliers/venue(s) about their environmental policies? Are you using local produce? What travel options are available?)
 |  |
| 1. **If you are not a PWS national association, we would encourage you, if reasonable and appropriate, and if one exists, to liaise with your national association. Will this be possible? Yes/No**
 |  |
| 1. **Any other information you wish to support your application. (Use additional pages if necessary).**
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**Provide detailed information on each cost associated with the event for which funding is being sought from IPWSO.** For example, list accommodation costs separately to travel costs for each speaker. Note that IPWSO cannot be held responsible for additional costs incurred after a proposal is approved nor for bank charges made by the applicant’s bank. A portion (amount to be agreed) of the total grant will be withheld by IPWSO until a written report is received from the grant recipient after the event.

|  |  |  |  |
| --- | --- | --- | --- |
| **Item**  | **Description** | **Unit Cost in USD** | **Total Cost in USD** |
| **HOTEL/VENUE** |  |  |  |
| **TRAVEL/TRANSPORTATION** |  |  |  |
| **ACCOMMODATION** |  |  |  |
| **RESOURCE PERSONS/PERSONNEL COST** |  |  |  |
| **WORKSHOP MATERIALS** |  |  |  |
| **MEDIA RELATIONS** |  |  |  |
| **COMMUNICATION COST** |  |  |  |
| **ADMINISTRATIVE LOGISTICS COST** |  |  |  |
| **TOTAL** |  |  |  |
| **How much funding, if any, is being provided for the event from other sources? Identify the sources.**  |

If this application is not successful, and a subsequent funding round is held in 2025, do you wish the application to also be considered for funding then? Yes / No

**Reimbursements will be made once receipts for expenditure(s) have been received.**

*The International Prader-Willi Syndrome Organisation (IPWSO) is a Charitable Incorporated Organisation (CIO) registered with the Charity Commission of England and Wales. Registered Charity Number 1182873*