*Epidemiology and Modeling of Infectious Diseases in the Humanitarian Setting*

**Virtual Training Application**

Please submit the completed application by **January 31, 2021** to [ready@savechildren.org](mailto:ready@savechildren.org)

Participants may also choose to apply using the online form, [available here.](https://www.surveymonkey.com/r/LXV6YZ2)

The *Epidemiology and Modeling of Infectious Diseases in the Humanitarian Setting* training is developed and administered by the READY initiative, a USAID/BHA funded consortium of partners led by Save the Children to augment global capacity for non-governmental organizations to respond to large-scale infectious disease outbreaks. For more information on READY, visit our website at [www.ready-initiative.org](http://www.ready-initiative.org).

**The goal of the training is to equip participants with foundational infectious disease epidemiology and modeling concepts, and to have a better command of the interpretation of common data that is available for humanitarian emergencies.**It will also explain and demonstrate how the data translates to models and scenario planning in large-scale disease outbreaks and prepares the learner to engage with and make use of epidemiological data and models in a variety of outbreaks. Upon completion, participants should be able to use epidemiological data, models, and scenarios to inform their humanitarian work.

This training is composed of 4 hours of online, self-paced training videos, and approximately 5.5 hours of live Zoom meetings, over a period of 2 weeks.

Applicants should expect to hear from READY on the status of their application by no later than

Friday, February 8, 2021.

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| **To which training are you applying? Select one:** | |
| **Middle East** Virtual Training February 17 – March 3, 2021  **Africa** Virtual Training March 4 – March 19, 2021  **Asia** Virtual Training March 11 – March 25, 2021 | |
| **Section 1: Personal Information** | |
| 1. Family Name: | |
| 1. First Name: | |
| 1. Gender (M/F/prefer not to answer): | |
| 1. Email Address (work email): | |
| **Section 2: Organization Information** | |
| 1. What country are you based in? | 1. What organization do you work for? Please spell out acronyms. |
| 1. Please select which category of participant best describes you. This will be helpful to place you in groups in the training and to ensure diversity in each group.   NGO national level leadership, program managers, and technical advisors  NGO regional leadership and technical advisers  UN cluster coordinators, sector leads, country directors, and regional advisers  Donor field-based staff  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| 1. What is your current role? | |
| 1. Current responsibilities (please include your managerial and technical responsibilities/roles): | |
| **Section 3: Education and Experience** | |
| 1. Please specify your professional background, e.g. clinical, development, project management, etc. | |
| 1. What previous experience do you have in building or analyzing epidemiological models? Note: previous experience working with models is not a prerequisite for this training. | |
| 1. Please check the epidemiological data/resources you currently use:   Routine clinical data from local health departments  Weekly Health Cluster Surveillance data and SitReps  Vaccination campaign data  Vaccination coverage surveys  Line lists for specific outbreaks  National and local disease specific weekly bulletin (e.g., EBV, COVID-19, Malaria)  Humanitarian Needs Overview (HNO)  Displacement Tracking Matrix (DTM)  Gender-Based Violence Information Managament System (GBV IMS)  National Integrated Disease Surveillance (IDSR) data  Multi-Cluster/Sector Initial Rapid Assessment (MIRA)  Demographic and Health Surveys (DHS) data  Weekly Early Warning and Reporting System (EWARS) reports  EWARN & Diseases Surveillance Bulletin Week: Weekly Epidemiological Bulletin  Multiple Indicator Cluster Survey (MICS) data  CMAM Reports  SMART Nutrition data  Regional Syndromic Surveillance Data (e.g., Pacific Syndromic Surveillance Weekly Bulletin)  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| **Section 4: Motivation** | |
| 1. Why do you want to participate in this training, and how do you foresee the content of this course enabling you and others to work more effectively? | |

**DECLARATION**

I declare that I have obtained supervisor approval to attend this course.

YES  NO

I agree to commit to the whole training program including online self-paced training videos (approximately 4 hours), attending three live sessions within the training period (approximately 5.5 hours), and engaging fully throughout the training program.

YES  NO

I have a personal or work computer, and consistent and reliable access to an internet connection.

YES  NO

I have a sound written and oral command of the English language.

YES  NO

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| **Please confirm that you agree fully to the above declaration:** | | Yes  No |
| **Name:** |  | |
| **Signature:** |  | |
| **Date:** |  | |