

**Global Learning Opportunities**  
World Health Organization  
Department of Immunization, Vaccines and Biologicals  
Quality, Safety and Standards  
Avenue Appia 20, CH-1211 Geneva 27, Switzerland

## **Global Learning Opportunities (GLO) Application Form for Vaccine Quality (VQ) courses**

**IMPORTANT:** Please read the below instructions carefully *before* completing this form. Please type or print legibly using block letters. All sections of this application **MUST** be filled in for the application to be considered valid.

The application form is designed in a FORM format to allow participants to fill it electronically. The cells may expand as participant enters more information. However, application should be done with hard copy since original signatures are needed for the section 7.

To be eligible for training through Global Learning Opportunities, applicants must submit the following materials through the WHO country representative to the WHO Regional Office:

1. Copy of Global Learning Opportunities application form co-signed both by the Director of applicant's Institute and by designated representative of Ministry of Health.
2. Copy of National Regulatory Authority (NRA) (or Manufacturer) institutional training plan form co-signed both by the Director of applicant's Institute and by designated representative of Ministry of Health.
3. Copy of most recent Institutional Development Plan following completion of WHO/NRA assessment.
4. Proof of language proficiency signed by an educational authority.
5. Curriculum vitae or resume.

***Answer all questions on the application form. Obtain all necessary signatures on the hard copy before you submit it to WHO country representative. Do NOT forget to attach proof of language proficiency in which the course is offered - in the form of certification signed by an educational authority. A telephone interview may be conducted by the GTN Secretariat to determine language ability with those individuals whose native language is different from the language of the course.***

### **Curriculum Vitae**

- All candidates must submit a curriculum vitae with details of current duties.
- For laboratory courses only [Biken, Bio Farma, RIVM (QC of DTP & Animal Husbandry courses only) and NIBSC] applicants must submit a curriculum vitae in the following scientific format:

Part 1. Details of scientific, medical, veterinary qualifications: Type of degree with dates of award and awarding institution.

Part 2. Laboratory experience in virology, bacteriology, immunology or similar area.

Part 3. Supervisory or management experience

Part 4. Experience in regulatory work including laboratory testing of products, tests (in *vitro* and *in vivo*) undertaken, protocol review, licence review.

Part 5. Research experience related to biologicals.

Part 6. Specify products currently controlled by the candidate's institution. What tests are currently being undertaken on these products?

**Submitting Application Forms and Supporting Materials** – PLEASE DO NOT SUBMIT APPLICATIONS DIRECTLY TO EITHER THE GLOBAL LEARNING OPPORTUNITIES SECRETARIAT OR THE TRAINING CENTRE. Please return your fully endorsed Global Learning Opportunities application form, institutional training plan, proof of language proficiency and curriculum vitae through the WHO country representative to the WHO Regional Office.

**Questions?** Call us at +41 22 791 4689 or send a fax at +41 22 791 4384. Email: [jnessi@who.int](mailto:jnessi@who.int)

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 World Health Organization  
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**Global Learning Opportunities Application Form**  
**for**  
**Vaccine Quality (VQ) courses**

| PART 1: Personal particulars of applicant  |  |  |
|--|--|--|
| <b>Family name:</b>  | <b>First name:</b>   |  |
| <b>Please indicate how you would like your name to appear on your certificate:</b>   |  |  |
| <b>Title:</b> <i>(please mark one)</i><br><input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Dr | <b>Gender:</b> <i>(please mark)</i><br><input type="checkbox"/> Male <input type="checkbox"/> Female   |  |
| <b>Nationality:</b>  | <b>Date of birth:</b>  |  |
| <b>Details of passport:</b><br>(a) Number      (b) Issuing authority<br><br>(c) Date of issue      (d) Date of expiry                                      |  |  |
| PART 2: Institution details  |  |  |
| <b>Name of institution</b>   |  |  |
| <b>Full professional mailing address including city/country</b>  |  |  |
| <b>Type of institution</b>   | <input type="checkbox"/> National Regulatory Authority (NRA)<br><input type="checkbox"/> National Control Laboratory (NCL)<br><input type="checkbox"/> Private Manufacturer<br><input type="checkbox"/> Public Manufacturer<br><input type="checkbox"/> Ministry of Health, EPI directorate<br><input type="checkbox"/> Ministry of Health, procurement or supply officer<br><input type="checkbox"/> Ministry of Finance or Ministry of Trade<br><input type="checkbox"/> Public procurement entity<br><input type="checkbox"/> Primary vaccine store<br><input type="checkbox"/> Regional/Provincial/district health directorate<br><input type="checkbox"/> Intermediate vaccine store<br><input type="checkbox"/> UN organization<br><input type="checkbox"/> International NGO<br><input type="checkbox"/> Faculty of institutions or higher education in health professions<br><input type="checkbox"/> Other (please specify) |  |
| <b>Contact details (including international and area codes)</b>  | <b>Tel:</b><br><b>Fax:</b>   | <b>Mobile phone:</b><br><b>E-mail:</b> |
| <b>Job title and description</b>   |  |  |

|   |  |
|---|--|
| <b>Briefly describe how your job relates to this course</b> |  |
|---|--|

**PART 3: Course(s) being applied for**

**Please note that the application in principle is made for the course, not for a specific location. Ideally participants would attend in the location in their region (or closest), but if not possible they will be accommodated in the other available location. Please do not mark more than 2 courses in one application.**

| Regulatory functions to be strengthened | Title of the course  | Institutions  | Language                     | Priority countries/target                                       |
|---|--|---|------------------------------|---|
| Regulatory system (all functions)       | <input type="checkbox"/> Regulation of vaccines (formerly Licensing) | TGA, Australia  | English                      | Producing, some procuring countries, NRA (high level officials) |
| AEFI*                                   | <input type="checkbox"/> AEFI and media training                     | UCT, South Africa<br>Nat'l Pharmacovigilance Centre, Tunisia,<br>MoH, Sri Lanka,<br>Tarashevich Institute, Russia | English<br>French<br>Russian | All countries   |

\* If you are applying for an AEFI course, please also complete the AEFI Pre-Training Assessment Form and attach it to this form.

|  |   |  |                    |  |
|--|---|--|--------------------|--|
| Lot release  | <input type="checkbox"/> Lot release  | Kasauli, India<br>AFSSAPS France                   | English<br>French  | Generally for producing countries and some procuring countries on a country-case basis |
| GMP inspections  | <input type="checkbox"/> GMP  | KFDA, Korea  | English            | Producing  |
| Clinical trials authorization                                | <input type="checkbox"/> CT authorization   | Badan POM, Indonesia<br>MRA, South Africa          | English            | Target for clinical trials of priority vaccines  |
| GCP inspection   | <input type="checkbox"/> GCP inspection   | MRA, South Africa<br>Badan POM, Indonesia          | English            | Target for clinical trials of priority vaccines  |
| Evaluation of clinical data for registration of new vaccines | <input type="checkbox"/> Clinical evaluation  | Badan POM Indonesia                                | English            | NRA evaluators/ Target for clinical trials of priority vaccines                        |
| Laboratory access  | <input type="checkbox"/> Quality control DTP  | RIVM, The Netherlands                              | English            | Generally for producing countries and some procuring countries on a country-case basis |
|  | <input type="checkbox"/> Laboratory quality systems   | NIBSC, UK<br>CECMED, Cuba                          | English<br>Spanish |  |
|  | <input type="checkbox"/> Vaccine quality control technology   | Biken, Japan                                       | English            |  |
|  | <input type="checkbox"/> Laboratory animal science and husbandry for vaccine quality control  | RIVM, The Netherlands /<br>CECAL (Fiocruz), Brazil | English<br>Spanish |  |
|  | <input type="checkbox"/> QA assurance of live attenuated polio and measles vaccines   | Bio Farma, Indonesia                               | English            |  |
|  | <input type="checkbox"/> DTP vaccine production for NRA staff   | RIVM, The Netherlands                              | English            |  |
| Training skills  | This course is run by the GLO/VQ HQ team in English and CVD Mali in French and is managed only by invitation. No applications are accepted.   |  |                    |  |
| Design and development of training course materials          | This course is run by the GLO/VQ HQ team in English and is managed by invitation only. No applications are accepted.  |  |                    |  |
| Pharmaceutical cold chain management on wheels               | For special application form, please consult <a href="http://www.who.int/immunization_standards/vaccine_quality/gtn_pccm/en/index.html">http://www.who.int/immunization_standards/vaccine_quality/gtn_pccm/en/index.html</a> page and to download the form click on the following link: <a href="http://www.who.int/entity/immunization_standards/vaccine_quality/application_pccmwheels2010.pdf">http://www.who.int/entity/immunization_standards/vaccine_quality/application_pccmwheels2010.pdf</a> |  |                    |  |

If you are applying for a Vaccine Quality Placement, please indicate your area of interest:

| <b>PART 4: Academic qualifications (latest first)</b> <i>(Please do not send copies of diplomas)</i> |                                 |                           |
|--|---------------------------------|---------------------------|
| <b>Name of school/institution</b>  | <b>Degree or diploma earned</b> | <b>Year of attendance</b> |
|  |                                 |                           |
|  |                                 |                           |
|  |                                 |                           |

| <b>PART 5: Professional background (current first)</b> <i>(List last three positions held)</i> |                      |                                     |                                  |
|--|----------------------|-------------------------------------|----------------------------------|
| <b>Name of institution</b>   | <b>Position held</b> | <b>Date of employment (from/to)</b> | <b>Brief description of work</b> |
|  |                      |                                     |                                  |
|  |                      |                                     |                                  |
|  |                      |                                     |                                  |

| <b>PART 6: Participation in workshops and courses</b> <i>(Please also include previously attended GTN courses)</i> |                          |              |                           |
|--|--------------------------|--------------|---------------------------|
| <b>Name of institution or GTN Training Centre</b>  | <b>Title of training</b> | <b>Where</b> | <b>Date of attendance</b> |
|  |                          |              |                           |
|  |                          |              |                           |
|  |                          |              |                           |
|  |                          |              |                           |

| <b>PART 7.1: Endorsement of national officials for Vaccine Quality courses</b> <i>(Must be signed by ALL parties indicated)</i>   |
|---|
| <p>The undersigned recommend that the applicant be admitted to the training course provided by WHO, to strengthen vaccine production and quality control, and certify that:</p> <p>(1) this training is part of a NRA/Manufacturer Institutional Training Plan;</p> <p>(2) the trainee will remain in a position to apply the experience gained through training for at least six months; and</p> <p>(3) that the institution will agree to provide training and/or services to other institutions following the training experience, in consultation with WHO.</p> |

|  | <b>Type or print name legibly</b> | <b>Signature</b> | <b>Date</b> |
|--|-----------------------------------|------------------|-------------|
| Institutional clearance:<br>Director of Applicant's Institute  |                                   |                  |             |
| Government clearance:<br>Designee of Minister of Health/<br>National Regulatory Authority (NRA) or<br>Procurement Entity (Indicate Position) |                                   |                  |             |
| Organization clearance (applicable only<br>for participants from UN organizations<br>and international NGOs)                                 |                                   |                  |             |
| WHO Regional Office clearance  |                                   |                  |             |

| Required attachments <i>(Your application form <b>will not</b> be accepted without the attachments listed below)</i> |   |
|--|---|
| <b>Required attachments for ALL courses</b>  | <input type="checkbox"/> Proof of language proficiency (please provide proof of proficiency in language in which the course is offered - in the form of certification signed by an educational authority. A telephone interview may be conducted by the GTN Secretariat to determine language ability with those individuals whose native language is different from the language of the course.<br><input type="checkbox"/> Curriculum vitae or resume |

| PART 8: Funding <i>(Please contact GTN Secretariat in Geneva for approximate costing)</i>  |  |
|--|--|
| For applicant's institute <i>(please tick appropriate box)</i>   |  |
| Is funding (full or partial) available from the applicant's Institute?   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| If yes, please indicate amount available   |  |
| For WHO Regional Office use ONLY <i>(please tick appropriate box)</i>  |  |
| Is funding available for this applicant?   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| If yes, please state source of funding:  | <input type="checkbox"/> Country Budget <input type="checkbox"/> Regional Budget <input type="checkbox"/> Other (please specify) |
| Even though funding may not be identified, you are encouraged to submit an application form providing it has all the necessary clearance signatures. |  |

**Submitting your application:**

**Please DO NOT submit applications directly to either the Global Learning Opportunities Secretariat or the training centre**

Please return your fully endorsed Global Learning Opportunities application form (see Part 7) with required attachments through the WHO country representative to the WHO Regional Office.

Applicants from UNICEF and partner organizations may submit their applications directly to WHO GTN Secretariat in Geneva.

Applications will be judged by qualifications and language proficiency. If accepted, you will receive a Global Learning Opportunities certificate upon successful completion of the course - your name will appear on your certificate as indicated on this application.

Please note:

- Answer all questions on the application form
- Type or print legibly
- Obtain the signature from the senior management in your organization.
- Provide proof of proficiency in the language in which the course is offered in the form of certification by an education institute. A telephone interview may be conducted with applicants whose native language is other than the language of the course.

If you have any questions, please feel free to contact the GTN Secretariat at WHO/HQ:

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