



Public Health Planning for Hearing Impairment - SHORT COURSE

Date: 17- 21 November 2014

Location: University of Cape Town, South Africa

Cost: ZAR 2000. 00

The World Health Organization estimates that there are 360 million people in the world with disabling hearing loss. Eighty percent of these individuals live in low and middle income countries. The number in sub-Saharan Africa totals 37 million.

COURSE AIM: To understand the magnitude and causes of hearing impairment and explore public health approaches for developing hearing health programmes in developing countries.

This course is suitable if you:

- Are an Otologist, Audiologist, Paediatrician or allied health professional, especially in the communication sciences, or are a health planner or an NGO staff member.
- Have an interest in the developing world.
- Are interested in establishing, continuing or resuming a career in ear and hearing health in the developing world.
- Have an interest in the planning principles involved in establishing public health programmes for ear and hearing health in the developing world.
- Are interested in working in partnership with developing world practitioners.

If you would like to apply to attend this short course **please complete the application form** below and return by email to janet.sirmongpong@uct.ac.za

Teaching

The course will be taught by experts who come from or who have lived and worked in developing countries.

Course Fees

The course registration fee is R 2000.00.

Accommodation

Limited university accommodation may be booked at a preferential rate if you apply before the end of September.

Scholarships

A number of full and part scholarships are available to students who would not otherwise be able to attend the course. These need to be applied for and are at the discretion of the course organisers.

If you have any queries about this course please contact janet.sirmongpong@uct.ac.za

Application Form

| Personal information | | | |
|----------------------|--|---------------------|--|
| Title | | Surname/family name | |
| First name(s) | | Gender | |
| Date of birth | | Nationality | |
| Country of birth | | Country of domicile | |
| Contact details | | | |
| Home address | | Postcode | |
| | | Country | |
| Email address | | Telephone | |
| Mobile | | Fax | |



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Please list your main degrees or qualifications held

| Year of award | Institution | Name of course | Qualification |
|---------------|-------------|----------------|---------------|
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Work experience

Please give a brief description of your current or most recent work experience

| | | | |
|---------------|--|----------|--|
| Employer | | | |
| Position held | | | |
| Start date | | End date | |

Please provide a brief description of the work involved below

Why do you wish to attend this course? (max. 300 words). Note places are limited.

Registration fee

The fee for the course is R 2000. If payment is not received you will be withdrawn from the course. Please indicate whether you have arranged for a sponsor (such as your employer or your institution) to pay for your fee or if you will be self financing and paying the fee yourself. If a sponsor is paying your course fee please provide a confirmation letter from your sponsor with your application.

| | |
|--|---|
| Sponsor | <input type="checkbox"/> State name of sponsor _____ |
| Indicate what sponsorship will cover | Fee <input type="checkbox"/> Travel <input type="checkbox"/> Accommodation <input type="checkbox"/> |
| Are you self financing? If yes, what? | Fee <input type="checkbox"/> Travel <input type="checkbox"/> Accommodation <input type="checkbox"/> |
| Applying for scholarship from course organiser for | Fee <input type="checkbox"/> Travel <input type="checkbox"/> Accommodation <input type="checkbox"/> |

Declaration



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MEDICINE



By submitting this form I declare that the information given in this application is correct, complete and accurate and no information requested or other material information has been omitted.

I have read, understood and will adhere to payment of a registration fee. **DO NOT SEND COURSE FEES OR MAKE TRAVEL ARRANGEMENTS UNTIL YOU HAVE BEEN NOTIFIED OF YOUR ACCEPTANCE ON THE COURSE**

I understand that the course may be cancelled two weeks before the first day of the course if numbers prove insufficient and in those circumstances full course fees will be refunded.

By checking this box I agree to all the above

If you have any queries about this course please contact janet.sirmongpong@uct.ac.za