



APLAR-EULAR SCHOOL OF RHEUMATOLOGY (ESOR) Program Application Form

1. GENERAL INFORMATION

APLAR aims to improve teaching and training in Rheumatology through APLAR-EULAR SCHOOL OF RHEUMATOLOGY (ESOR) program.

- ESOR is an integrated Learning Management System with easy login, access to their profile and all educational offerings at a glance
- The EULAR Online Course on Rheumatic Diseases (RMD) is one of the online programs that ESOR members can choose from. The full version of the course covers the entire field of rheumatology have been developed by experts in EULAR and endorsed by the APLAR leadership. The full course consists of 50 illustrated modules (of which some are optional), each one covering a specific topic. Each module corresponds to approximately 5 - 8 hours of study for the student, totalling around 210 - 336 hours of educational training. The total number of modules to be completed is 42.
- There are other On-line courses and Live courses and meetings that the member can choose from.
- To support this initiative, APLAR will sponsor APLAR Young Rheumatologist (AYR) members to join EOSR as Member.

2. DETAILS OF THE APLAR-ESOR PROGRAM

- The ESOR membership fee is EUR 30 per person per year to be paid by APLAR.
- Each applicant will need to join ESOR as a member before online course registration.
- Applicant will need to choose at least one of the ESOR on-line program upon successful ESOR membership.
- EULAR will give a 50% discount (code will be provided) on the cost of the RMD course and the cost of the other selected on-line program by the applicant will be similar to other ESOR members.
- The quota for applicants from each Member National Organization (MNO) will be up to 10 (EUR 300) per year.
- The application form should be submitted by the president of the MNO with a cover letter endorsing the application of all the candidates nominated.

3. ELIGIBILITY

- Only AYR members - Fellows in training in APLAR countries and Rheumatologists less than 40 years of age before the deadline of application - can apply.



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4. APPLICATION PROCESS

- An application consists of submission of this completed application form and all supporting documentation relating to the application. You should fill in all spaces on the application form. If a question does not apply, write 'not applicable' or 'N/A' in the space.
- Please note that the information on this form are collected to make recommendations to the APLAR Education Committee. The information may be passed to third parties for assessment purposes.
- Completed application forms should be emailed to the **APLAR Office** at secretariat@aplar.org by the president of the MNO on or before July 31, 2021.
- If you have any questions about the grant or application, please contact secretariat@aplar.org.
- Useful information for your application: ESOR website: <https://esor.eular.org/>
- Successful recipients of the grants are required to complete a post-event documentation form.
- Successful recipients of the grants who failed to register for any on-line course will be disqualified for application of any sponsorship for the coming year (2022-2023)

5. TIMELINE

- Deadline of application: July 31, 2021
- Results of the application will be released by August 30, 2021
- Successful candidate can start new membership September 2021 to June 2022

6. PAYMENT

- APLAR would be liaising directly with EULAR for invoicing of ESOR membership fee.



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I CERTIFY THAT:

I have read, understood and complied with the ESOR Education Grants criteria and to the best of my knowledge all details provided in this application form and in any supporting documentation are true and complete in accordance with these grant rules. I will notify APLAR if there are any changes after the submission of this application.

Should this application for funds be successful, I agree to submit the completed post-event documentation form provided by APLAR, with relevant supporting documents within 2 weeks of the meeting date.

If my application is successful, I agree to spend the funds as indicated in this application. If the funds are not spent for the educational activity indicated in this application, I agree to refund the grant received or request an extension. Please note that requests to change how the grant is spent can be made to the grant coordinator for consideration (minor changes within the intent of the grant will most likely be approved).

Signature of applicant/authorized representative : _____
Name of applicant/authorized representative : _____
Job title : _____
Date : _____



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PART A – DETAILS OF APPLICANT

Name (please enter your full name as shown on your identity documents)

Job title : _____

Organization : _____

Mailing address : _____

Postcode : _____

City : _____

Country : _____

Phone number : _____

Mobile number : _____

E-mail address : _____

Please provide AYR membership acceptance email

PART B – DETAILS OF APPLICANT’S AFFILIATED INSTITUTION / ORGANIZATION

Name of organization : _____

Address : _____
: _____

Postcode : _____

City : _____

Country : _____

Website : _____



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Please choose (X) the type of your organization:

- Government Agency
- University/College/Academic Institution
- Public Hospital/Clinic/Healthcare Centre
- Private Hospital/Clinic/Healthcare Centre
- Professional Association
- Others _____

Provide any relevant background information about your institution/organization, especially in relation to rheumatology (e.g., 'my hospital has a rheumatology clinic', 'our area health service trains nurses who work in small district hospitals that does follow-up care for rheumatology patients'). Please limit your response to no more than 200 words.



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A personal statement outlining how participation in the APLAR ESOR program will benefit your research or clinical career and how they can contribute to the program

FOR APLAR USE ONLY

Application Number : _____

Date : _____

Comments : _____

