HMIS and Research Section (HERS) Policy and Planning Division Ministry of Health Thimphu : Bhutan

3rd National B SMART Workshop

Application Form

WORKSHOP CURRICULUM

Module 1:		Research questions and protocol development
		July 1-7, 2019
Module 2:		Data management and data analysis-I
		July 8-14, 2019
Module 3:		Data analysis-II and STATA
		February 14-20, 2020
Мс	odule 4:	Scientific paper writing
		February 21-27, 2020
VE	NUE	Paro, Bhutan
1.		Information in your name exactly as you want it to appear on the workshop certificate.
	Title: Dr[Mr Ms Male Female
	Name:	
	Place of	vork:
	Work add	ress:
	Mob	ile No.:Fax
	E-m	ail
	Current F	rofession (Job title):
	Note: All	participants are required to bring a laptop (Windows compatible, with administrative rights t
		software) to the workshop. Please do not bring a Netbook or i-pad.
•	04.4	
۷.		Data Collection ave already been collected and are available
		re being collected and will be completed within the timeframe of the workshop
	∐ Dala a	re not available and will have to be collected prospectively
3.	Funding	details
	☐ The fu	nd for the proposed study is secured
	☐ No fun	d is required for the conduct of the study
	☐ Fund f	or the proposed study has to be mobilized

Please send with your Application Form the following documents:

- 1. Typewritten detailed Curriculum Vitae.
- 2. Written statement from yourself confirming your commitment to participate in all four course modules.
- 3. Written statement from your direct supervisor/head of the institution granting permission for you to have the time and opportunity to carry out operational research, and support you in adhering to the timelines of the course.
- 4. Concept note (Refer the template below for details).
- 5. If the fund for the proposed study has to be mobilized please submit the estimated budget.

TEMPLATE FOR THE CONCEPT NOTE

Title (200 characters maximum):

Problem Statement/Background (describe the problem you have identified. 1000 characters maximum):

Research Question(s) (formulate a research question that you propose to develop into an operational research project during the workshop. 1000 characters maximum):

Data Source/Methods (Describe briefly from where you would be collecting the data or sourcing the data. You may have already begun such research, in which case you should describe what you have started and how you intend to continue. 1000 characters maximum):

The research should be completed within a time-frame of 4-6 months.

Application Deadline: 7th June, 2019

Complete this document and send by e-mail or post (along with all the other required documents) with a subject title "Application for 3rd National B SMART Workshop" to:

HMIS and Research Section (HERS) Policy and Planning Division Ministry of Health

Tel: 02 322602 ext 308 | Mobile: +975 17920280

E-mail: msgurung@health.gov.bt

Note

- Please contact Mr Mongal Singh Gurung, Sr. Research Officer, for any clarifications through e-mail or telephone at the address above (email is preferred).
- Results of the selection process will be communicated to all applicants by June 20, 2019.
- Failure to provide all of the above requested information may result in the rejection of your application.
- It is the prerogative of the selection committee to decide on selection. Their decision will be final.
- Please note that all supportive documents must be in Word or PDF format.

I understand that the decision of the Selection Committee will be final in matters related to my selection to the workshop and that I will not be able to pursue any dispute legally.

Applicant's signature: Date:	