



## IDF Young Leaders in Diabetes Programme 2017 Application form for candidates

### VISION

To improve the lives of young people affected by diabetes worldwide.

### MISSION

The IDF Young Leaders in Diabetes (YLD) Programme is the key driver in enhancing the lives of young people living with diabetes. The Young Leaders are committed to raising awareness of diabetes by being a powerful voice for prevention, education, access to quality care, improved quality of life, and the end of discrimination worldwide. The IDF YLD Programme supports IDF and its Members in reaching its strategic goals.

### AIMS

The IDF YLD Programme aims to reach the following goals:

1. Be a voice for young people affected by diabetes worldwide;
2. Identify and support the development of Young Leaders in the international diabetes community;
3. Empower and educate Young Leaders to support the mission of YLD and IDF by strengthening the IDF Members. (Encourage young people to become active volunteers in their local association.)

### Applicants MUST meet the following requirements to be accepted into the Programme:

- Be between 18 and 29 years of age and living with diabetes;
- Communicate effectively in English (the Young Leaders are expected to understand, read, write and speak English to be able to communicate with other Young Leaders and the IDF Executive Office);



- Have an active relationship with an IDF Member and maintain that relationship for a minimum of two years after becoming a Young Leader;
- Exhibit passion for making a difference in the diabetes community, locally, nationally and/or globally;
- Have access to the internet for communication and reporting purposes;
- Be able to immediately develop, lead and execute a diabetes;
- Be committed to allocating the time and maintaining the skills required to be involved in the Programme. This will include participating in various activities directed by the IDF Executive Office.

**Applications will be accepted until the 10<sup>th</sup> May 2017.** Places in this Programme are limited and the application process is extremely competitive. Late applications will not be accepted.

*During the application process, you may be asked to participate in a Skype interview.*

Applicants will be notified about the outcome of their application no later than 30<sup>th</sup> June 2017. Please make sure you include the following documents with your application form:

1. Letter of recommendation from an IDF Member (a model has been provided to the association that will nominate you). Additional reference letters from other Young Leaders from your country, or from your YLD Regional Representative will have added value, but are not compulsory;
2. Copy of the identification page of your passport that includes your photo

**Please return this application form to your IDF Member by the time they indicate you. The IDF Member will then submit this form to IDF no later than May 15<sup>th</sup> 2017.**



## Application form

### Your Personal Information, Education & Experience

Name: \_\_\_\_\_

Family name: \_\_\_\_\_

Country you would be representing: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender:      M      F

Type of diabetes: \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact telephone number (prefix included): \_\_\_\_\_

Skype User Name: \_\_\_\_\_

If active on raising awareness about diabetes online, add your link(s) to the social media channels:

(Please insert a recent photo of yourself)



**Local Address:** \_\_\_\_\_  
\_\_\_\_\_

**Name and contact details of Member Association:** \_\_\_\_\_  
\_\_\_\_\_

**Other Diabetes Group, Association or Company Affiliations:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Current Job Title or Student Status:** \_\_\_\_\_

**Education: (*highest degree attained and any additional qualifications or certification*):**  
\_\_\_\_\_

**Please rate your English language proficiency:**

- Full Proficiency (use language for professional speaking & writing needs)
- Proficient (speak/write language for social demands & limited work requirements)
- Elementary Proficient (use language for travel and communicating basic needs)
- No practical proficiency (I do not speak the language)



Please provide a detailed description of your diabetes-related professional or volunteer experience (if any):



**Please describe your prior involvement (if any) with the IDF Member (committees, professional or volunteer roles, etc.)**

**Please provide details of any extracurricular activities (diabetes and non-diabetes related) in which you have held a leadership role, including volunteer, school and/or athletics.**



In what way has diabetes-related programs and education (i.e.: diabetes camp, diabetes group, events, conferences, etc.) influenced your life?



## Essay: Your Leadership Vision

Why would you like to be a member of the IDF Young Leaders in Diabetes Programme?

In this essay, please include the qualities, skills and experience that you will bring to the Programme; how you can foresee working with the IDF Member and why you should be the Young Leader representing your country.



## Fundraising activities

It is expected those participants in the Young Leaders in Diabetes Programme that will attend the Abu Dhabi Training will find the funding for their travel expenses, which may involve some fundraising. Please describe any fundraising activities you have previously been involved with and highlight activities that were a success and those that were not.



## Your Diabetes

A Young Leader is a role model for others with diabetes. As a Young Leader, your own health is extremely important to your ability to fully engage in the Programme’s activities and events. Living a healthy life allows you to show others that diabetes will not prevent you from achieving your goals.

While not required, we ask that you provide information about your own diabetes, your diabetes management, your diabetes challenges and areas where you feel you could benefit from a broader understanding of advancements in the field.

<b>Insulin type and oral agents (pills) (include all types taken)</b>	Long Acting, TYPE: Intermediate Acting, TYPE: Short Acting, TYPE: Mixed, TYPE:  Pills:
<b>Year of Diagnosis</b>	
<b>Type of Diabetes</b>	
<b>Age at diagnosis</b>	
<b>Administered by</b>	
<b>Describe your diabetes management regimen (include what blood glucose meter you use, testing frequency, etc.)</b>	
<b>What is your biggest challenge with your diabetes care</b>	
<b>Have you been admitted to a hospital due to your diabetes in the last 2 years? If yes, please provide frequency of hospitalizations and overall reasons. (this is to ensure safety for all)</b>	



Are there any areas you feel you would benefit from further training in managing your diabetes or suggestions for topics to be covered at the YLD Training that would be helpful to you?

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