This application can only be accepted for Fellowship Programs that meet the criteria as described in the attached Guidelines for ISAPS Fellowship Program Endorsement (page 3). All program details as submitted by the provider to ISAPS will be kept in confidence and not shared with any other programs.

Annual renewal of endorsement shall require a letter sent to the ISAPS Executive Office formally requesting extension of the endorsement. Renewal shall be subject to committee review of the submitted summary of the previous program, plans for any changes to the initial program including any instructor or educational venue changes, and a renewal fee of $3,000.

If ISAPS endorses your fellowship program, ISAPS will provide for your organization:

- Use of the official ISAPS logo and official endorsement statement in your publicity materials, on your website, and in other program related printed matter - only the approved language and logo can be used and will be provided with approval of your application.

- Official ISAPS Certificate of Completion specific to your program, provided to each Fellow who successfully completes your program

Requirements for General Application - all items must be submitted with this form

- Copy of the application to be completed by prospective Fellows who wish to participate in your program
- Copy of proposed program including topics and description of hands-on training aspects
- Sample schedule showing hours per week that fellows participate in clinical activities
- List of instructors including credentials
- Description of center(s) where fellowship program will be held including clinical rotation sites
- Approval letter from the ISAPS National Secretary confirming suitability of facilities and instructors
- Description of program funding and fee structure (See item 3g in Guidelines)
- Description of Fellow evaluation process (attach sample evaluation form if available)
- Endorsement Fee payment - $3000

Follow-up Requirements for each Fellowship

- Names and contact information for all fellows who participated in the program during the endorsement period including duration of the program for each fellow. This information should be sent to ISAPS at the conclusion of each Fellowship period if multiple annual Fellowships are planned.
Summary of proposed changes to future program.
Summary of evaluations and final pass/fail determination for each Fellow in each program.

Fellowship Program Title:

Location(s):

Date(s): Number of Fellows to be accepted:

Sponsoring Society or Organization:

ISAPS Member Completing Application:

National Secretary responsible for program oversight:

Funding Sources

☐ Registration Fees (specify amount):
☐ Industry support (specify companies and amounts):
☐ Educational Grants (indicate sources and amounts):
☐ Other, please specify:

Program Coordinator:

Department:

Affiliation/Company/Organization:

Street Address:

City: State or Province:

Country: Postal Code:

Telephone: 

Country Code/City Code/Local Number

FAX:

Country Code/City Code/Local Number

E-mail:

Website where program will be promoted:

Endorsement Fee of US$3,000.00 should be payable to ISAPS and enclosed with the application. $2500 of the fee will be refunded if the program is not approved for any reason.

- Checks or Bank Drafts must be payable to ISAPS, must be from a US bank, and must be sent to the Executive Office. FOREIGN BANK CHECKS CANNOT BE ACCEPTED.
- Wire transfers - please contact the Executive Office for wire instructions: isaps@conmx.net

APPLICATIONS must be sent to the Executive Director:

Catherine B. FOSS, Executive Director
ISAPS Executive Office, 45 Lyme Road - Suite 304, Hanover, NH 03755 USA
Fax / 1-603-643-1444 Email / isaps@conmx.net

FOR OFFICE USE -

The ISAPS Education Council ☐ APPROVES ☐ DOES NOT APPROVE Date of notification: ____________

Comments:

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GUIDELINES FOR ISAPS FELLOWSHIP PROGRAM ENDORSEMENT

REQUIREMENTS FOR FELLOWS
Fellows in ISAPS endorsed training programs must be in one of the following categories:

- plastic surgeons who have completed a recognized plastic surgery training program in their country
- residents who are in the last two years of their training in an official plastic surgery training program in their country

**Plastic surgeons**

1. must provide an officially approved plastic surgery diploma or certificate issued by their national health authority.
2. National Secretary in their country must provide a letter of approval confirming that the fellow has a valid plastic surgery diploma and has no known ethical misdeeds.

**Fellows and Residents**

1. A letter is required from the National Secretary of ISAPS in the country where the fellow trains confirming that the residency program is an official plastic surgery training program in that country.
2. A letter is required from the Director of the Residency Program confirming that the fellow has no ethical misdeeds.

**REQUIREMENTS FOR THE FELLOWSHIP PROGRAM**

1. Fellowship program must include hands-on training with fellows participating in clinical activities.
2. Each program must have a designated Program Coordinator who is a board certified plastic surgeon and who must be a member of ISAPS.
3. The Program Coordinator must submit details of the fellowship program to the ISAPS Education Council for approval. These details must include the following information:
   a. Topics of focus
   b. Description of hands-on training aspects including the number of hours per week fellows will participate in clinical activities and how the fellows will be evaluated (example: logbooks)
   c. Names and credentials of all instructors who will participate in the fellowship program
   d. Name of the center/centers where the fellowship program will be held
   e. Names of the fellows who will participate in the fellowship program during the endorsement period
   f. Duration of fellowship program for each fellow
   g. Finances of the fellowship program
      i. Is the program financially supported by a society or a company?
      ii. Will fellows pay for the program? If so, what is the fee?
      iii. Will fellows receive salary, stipend or housing during the program?
4. National Secretary of the country where the Fellowship Program will be held must provide a letter of approval confirming that the centers are physically sufficient and that the instructors have the educational capabilities with no conflict of interest and are ethical and well known within their society.

**FELLOWSHIP PROGRAM DURATION, COST AND EVALUATION**

- Endorsement of fellowship program will be for one year renewable upon re-application.
- Endorsement fee: USD$3,000.00 per year.
- The ISAPS Education Council will provide an evaluation form to each fellow after completion of fellowship program. It is required that each fellow submit the form to ISAPS.

**APPROVAL OF FELLOWSHIP PROGRAM**

Applications will be reviewed and approved by Fellowship Committee members.

A certificate of completion will be provided to fellows by ISAPS, signed by the Fellowship Program Director, the ISAPS President and the ISAPS Education Council Chair.

**ISAPS Fellowship Committee**

Eric Auclair, MD - Chair
Jamal Jomah, Saudi Arabia  Sufan Wu, China  Gianluca Campiglio, Italy