**AUTHORIZATION FORM**

Dear Surge Learning Team,

I hereby certify that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of applicant), who works as a member of my team in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (NS / IFRC Office with location), has my support to participate in the **Emergency Team Leader (ETL) Training** from 22 to 28 November 2025 in Budapest, Hungary and **will have the required number of hours** (around 50 hours) to complete the pre-training activities.

Likewise, once the course has been successfully completed, this colleague will have my support **to be deployed for 1-3 months** at least once during the next 2 years.

**Payment options (select one option)**

The cost of the training is 2000 CHF, including the training fee, accommodation, full board and materials (travel costs are not included). Your NS / IFRC / ICRC office can sponsor other participants who would otherwise not be able to participate.

We can cover the participation and travel costs for our participant.

In addition to covering the costs of our participant, we are willing to sponsor travel and participation costs for one more person (for an extra 3,000 CHF)

In addition to covering the costs of our participant, we are willing to sponsor travel and participation costs for two more people (for an extra 6,000 CHF)

We cannot pay the fee and kindly request funding support (full or partial).

Name and position of the line manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email of the line manager: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_