COURSE: 65-2017

INNOVATION AND ENTREPRENEURSHIP IN THE EDUCATION SYSTEM

MODALITY OF THE COURSE: PRESENCIAL
DATE: November 12 to December 1, 2017
LANGUAGE COURSE: ENGLISH
COUNTRY: ISRAEL

CLOSING DATE IFARHU
August 15, 2017
Aims

- To provide new tools and knowledge on the implementation and development of Innovation and Entrepreneurship in the educational system.
- To promote and create a learning environment that leads the students to experiment Innovation and Entrepreneurship methods and practices.
- To share experiences of Innovation and Entrepreneurship in education.
- To create tools for communication, collaboration and teamwork.
- To provide educational tools for quality innovative educational pedagogies.
- To support the integration and the implementation of 21st century education skills.
- To present innovative teaching methods for specific subject-matters (science, language, etc.), as well as interdisciplinary subject areas, enabling participants to choose the methods and tools suitable to the particular needs of their environments.
- To empower the educational staff and promote their Innovation and Entrepreneurship programs.
- To provide a base for future training activities in the Education for Innovation and Entrepreneurship training according to the needs of the different countries and institutions.

Main Subjects

Course Content

- Development of ways of thinking: critical, creative, strategic and tactical thinking.
- Development of social skills, collective performance techniques and teamwork.
- Analyzing the incorporation of innovative ideas.
- Presenting the importance of a supportive environment and a community of learning.
- The influence of motivation for learning and self-improvement.
- Becoming an entrepreneur: skills, concepts and practices.
- The Educator / Teacher / Entrepreneur: Education & work culture, curricula development, educational initiatives, project development, project-based learning, innovation in education, success stories, the educator as an entrepreneur and a leader.
- Student-based Learning: Student entrepreneur communities, examples of initiatives.
- The school and the community as entrepreneurs.
- Presenting the idea of experimental schools as entrepreneurial environments.

Methodology

- Lectures and discussions led by experts in various fields.
- Workshops.
- Analysis of educational planning through written material and professional visits.
- Meetings with institutional administrators and acquaintance with projects at the national and regional level.
- Simulations, panel discussions, and group work.
- Preparation of final projects by individuals or groups, based on the professional interests of participants.
- Study tours at: different types of schools at all levels, educational centers (science, art, etc.) and teacher training institutions and pedagogical resource centers

Application

Application Requirements
High-level educational staff, regional or national, lecturers at teacher training institutions, school principals, counselors, or supervisors, and researchers in relevant fields.

Application forms
Application forms and other information may be obtained at the nearest Israeli mission or at MASHAV’s website: 

Completed application forms, including the medical form, should be sent to the relevant Israeli mission in the respective country.

General Information

Arrival and Departure

Arrival date: 7.2.2016
Opening date: 8.2.2016
Closing date: 25.2.2016
Departure date: 26.2.2016

Participants must arrive at the training center on the arrival date, and leave on the departure date. Early arrivals/late departures if required, must be arranged by the participants themselves, directly with the hotel/center, and must be paid for by the participant him/herself.

Health Services

Medical insurance covers medical services and hospitalization in case of emergency. It does not cover the treatment of chronic or serious diseases, specific medications taken by the participant on a regular basis, dental care and eyeglasses. Health authorities recommend that visitors to Israel make sure they have been inoculated against tetanus in the last ten years. Subject to the full binding policy conditions. Participants are responsible for all other expenses
REQUIRED DOCUMENTS

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<thead>
<tr>
<th>Documents</th>
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<td>1. A postulation letter must be delivered from the highest authority of</td>
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<td>Israeli mission or at MASHAV’s website: <a href="http://mashav.mfa.gov.il/MFA/mashav/Courses/Pages/default.aspx">http://mashav.mfa.gov.il/MFA/mashav/Courses/Pages/default.aspx</a>. Completed application forms, including the medical form, should be sent to the relevant Israeli mission in the respective country.</td>
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<td>6. College Diploma*</td>
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<td>7. College Credits*</td>
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<td>8. Curriculum Vitae.</td>
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<tr>
<td>9. ID card, both sides*</td>
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</tr>
</tbody>
</table>

OBSERVATIONS

❖ All the documents with* (Asterisk) need to be authenticate at IFARHU Ground Floor.

Contact the Department of International Scholarships
Gisela Lemos g.lemos@ifarhu.gob.pa
Nelva de Domínguez: nedominguez@ifarhu.gob.pa
Guillermo Hernández: g.hernandez@ifarhu.gob.pa

Department of International Scholarships
Flat N° 6 Tel: 500-4719 ext. 2179
Building: UNICORP BUSINESS PLAZA
Calle Ramón Arias, Urb. El Carme
MASHAV - Israel’s Agency for International Development Cooperation

with

The A. Ofri International Training Center

invite professionals to participate in the

International Course:

Innovation and Entrepreneurship in the Education System

12.11-1.12.2017
About the Course

Background

“There is no doubt that creativity is the most important human resource of all. Without creativity, there would be no progress, and we would be forever repeating the same patterns.”

Edward de Bono

How is entrepreneurship anchored in the field of education? How may the learning processes be understood and handled according to an entrepreneurial approach? Can innovation and entrepreneurship be taught?

It’s an age-old debate!! The answer is both yes and no. Education plays an essential role in shaping attitudes, skills and culture – from the primary level up. Innovation and entrepreneurship in education provide a mix of creativity, experiential learning, skill building and most importantly, a shift in mindset. Certainly the earlier and more widespread the exposure to innovation and entrepreneurship, the more likely students will consider entrepreneurial ideas at some point in the future.

The implementation of the entrepreneurial idea in the future will reflect the progression in the level of skills and qualifications students need to acquire in the course of their education. Thus, the aim in primary and secondary schools is that students develop competencies such as creativity, initiative, inventiveness and personal qualities within all the standards and performance indicators to apply the 21st century skills that are necessary to adapt to our changing world.

The innovation and entrepreneurship educational policy must, therefore, be anchored in the specific skills and pedagogic methods of the different academic disciplines.

The main focus is on developing cross curricular approaches and making it easier to coordinate the various educational programs as pupils conduct research and prepare written and visual presentations of their work.

The pedagogical methods should promote the following:

✓ Open learning - in which learning outcomes are determined by the students.
✓ Active learning - different situations in which students choose the areas of implementation for their projects.
✓ Learning experiences beyond the classroom- through the use of different information sources (resources, experts) and materials from society and the natural environment.
✓ A learning atmosphere – which promotes and fosters collaboration and teamwork, encourages new ideas and creativity, tolerance for trial and error and tolerance of failures.
✓ Thinking strategies - identification of significant questions, and problem-solving skills that clarify various points of view and lead to better solutions.

Another main point to consider is the position of the educators as role models in a dynamic and social process where individuals alone, or in collaboration, identify opportunities for innovation. In this process it is essential to build up the educators' skills to act upon these aspects by transforming ideas into practical and targeted activities, whether in a social, cultural or economic context .This should be done through capacity building, competence development, practical experience and research with an ongoing training in innovative teaching and learning methods.

As one of the practical levels of innovation and entrepreneurship in education, the school becomes a place for experimenting, a place to develop and participate in project-based learning environments, a place where entrepreneurship is part of the organizational and educational culture and where the teacher and the director are entrepreneurs themselves.
Aims

- To provide new tools and knowledge on the implementation and development of Innovation and Entrepreneurship in the educational system.
- To promote and create a learning environment that leads the students to experiment Innovation and Entrepreneurship methods and practices.
- To share experiences of Innovation and Entrepreneurship in education.
- To create tools for communication, collaboration and team work.
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- Simulations, panel discussions, and group work.
- Preparation of final projects by individuals or groups, based on the professional interests of participants.
- Study tours at: different types of schools at all levels, educational centers (science, art, etc.) and teacher training institutions and pedagogical resource centers.

Social Activities and Tours

The seminar includes organized tours of holy sites and locations of general and historical interest. Social and cultural activities will be arranged.

Application

Application Requirements

High-level educational staff regional or national, primary and secondary schools principals, lecturers at teacher training institutions, counselors or supervisors in relevant fields.
Application forms should be sent to the relevant Israeli Mission and to the Ofri Center by or before 10.9.2017

Application forms
Application forms and other information may be obtained at the nearest Israeli mission or at MASHAV’s website: http://mashav.mfa.gov.il/MFA/mashav/Courses/Pages/default.aspx.
Completed application forms, including the medical form, should be sent to the relevant Israeli mission in the respective country.

General Information

Arrival and Departure
Arrival date: 12.11.2017
Opening date: 13.11.2017
Closing date: 30.11.2017
Departure date: 1.12.2017

Participants must arrive at the training center on the arrival date, and leave on the departure date. Early arrivals/late departures if required, must be arranged by the participants themselves, directly with the hotel/center, and must be paid for by the participant him/herself.

Location and Accommodation
MASHAV awards a limited number of scholarships. The scholarship covers the cost of the training program including lectures and field visits, full board accommodation in double rooms (two participants per room), health insurance (see below) and transfers to and from the airport. Airfares and daily allowance are not included in the scholarship.

Health Services
Medical insurance covers medical services and hospitalization in case of emergency. It does not cover the treatment of chronic or serious diseases, specific medications taken by the participant on a regular basis, dental care and eyeglasses. Health authorities recommend that visitors to Israel make sure they have been inoculated against tetanus in the last ten years. Subject to the full binding policy conditions. Participants are responsible for all other expenses.

The course will be held at the A. Ofri International Training Center, situated in the Ramat Rachel Hotel on the outskirts of Jerusalem. Participants will be accommodated in double rooms (two participants per room).

About MASHAV
MASHAV – Israel’s Agency for International Development Cooperation is dedicated to providing developing countries with the best of Israel’s experience in development and planning. As a member of the family of nations, The State of Israel is committed to fulfilling its responsibility to contribute to the fight against poverty and to the global efforts to achieve sustainable development. MASHAV, representing Israel and its people, focuses its efforts on capacity building, sharing relevant expertise accumulated during Israel’s own development experience to empower governments, communities and individuals to improve their own lives. MASHAV’s approach is to ensure social, economic and environmental sustainable development, and is taking active part in the international community’s process of shaping the Post-2015 Agenda, to define the new set of the global Sustainable Development Goals (SDGs).
MASHAV’s activities focus primarily on areas in which Israel has a competitive advantage, including agriculture and rural development; water resources management; entrepreneurship and innovation; community development; medicine and public health, empowerment of women and education. Professional programs are based on a “train the trainers” approach to institutional and human capacity building, and are conducted both in Israel and abroad. Project development is supported by the seconding of short and long-term experts, as well as on-site interventions. Since its establishment, MASHAV has promoted the centrality of human resource enrichment and institutional capacity building in the development process – an approach which has attained global consensus.

http://mashav.mfa.gov.il
https://www.facebook.com/MASHAVISrael

About the A. Ofri International Training Center
The A. Ofri International Training Center was established in 1989 as a professional extension of MASHAV - Israel’s Agency for International Development Cooperation. The activities are targeted to meet the Millennium Development Sustainable Goals-SDGS set by the United Nations to be fulfilled by the year 2030.

The Center's vision is that education is the starting point for a person to build himself/herself a gate to new possibilities. Education is the key to a better future and shields against physical harm and confronts moral dilemmas. Education enables us to ask for proper healthcare when needed, and the way to stay healthy and adopt responsible behavior with our bodies. Education is sharing, learning and growing up together with others. Through education we can learn to take better care of our world, treat it respectfully and use wisely the resources it offers us.

Education concerns itself with learning at all levels, from elementary and secondary school through adult education, and provides knowledge and training for basic skills development, civic awareness, community education, education for special populations, treatment for youth (Including those at risk), youth integration, youth leadership, education for health and the prevention of drugs abuse.

Since its inception, the A. Ofri Center has trained thousands of professionals from countries throughout the world. The Center cooperates with senior staff in the Israeli Ministry of Education, academic experts, governmental organizations and non-governmental organizations. In addition, it communicates and cooperates with key international organizations such as UNESCO, OECD, USAID, UNODC, OAS, IOM and the World Bank.

In adopting the UN’s Millennium Development Goals, the A. Ofri Center contributes to the sustainable development of human resources internationally, based on knowledge and experience accumulated in Israel.

For further information, please contact:
The A. Ofri International Training Center:
Address: Ramat Rachel, D.N. Tzfon Yehuda, 909000
Tel: 972-2-6702508
Fax: 972-2-6702538
Email: info@metc.org.il
Website: www.ofri.org.il
Dear Applicant,

Thank you for applying for a professional training program in Israel. In order for us to consider your application, please complete the enclosed form and return it to the nearest Israeli representative (embassy or other).

Please make sure that all the required information has been provided in detail. Please type your answers. This will facilitate the application process and enable us to make our decision in as short a time as possible.

Only candidates who are accepted will be notified by the Israeli representative. Thank you for your cooperation.

ESSENTIAL:
This application form must be TYPED IN THE LANGUAGE OF THE PROGRAM, and accompanied by the following:

- Completed and approved medical certificate form (attached).
- Certificate of language proficiency (If the language of the program is not your mother tongue or the official language of your country).
- Photocopy of the relevant highest academic degree obtained translated to the language of the program.
- A passport photo.
- Two letters of recommendation from present employers or relevant affiliation.
- These forms should reach the nearest Israeli representative at least ten weeks prior to the opening of the program.

FOR OFFICIAL USE ONLY

שגרירויות/ נציגות ישראל במזרח
תאריך קבלת השאלון _________________________

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שם משפט

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חתימה
חתימת השגריר

• ניידעו בצו
• ניידעו בצו
1. General
Name of the training program ______________________________
______________________________________________________
Name of training institution in Israel ________________________
Dates: _____________    Language of the course_______________

Financial arrangements:
Flight ticket will be paid by________________________________________________
Tuition and accommodation will be covered by _______________________________

2. Personal Data
Surname____________________________ Given Names ________________________
Country_______________________             Citizenship    ________________________
Religion_______________________            Passport No.  ________________________
Date of Birth_________________ Gender: Male / Female
Home address ___________________________________________________________
_______________________________________________________________________
Telephone (country code______) (area code_______) Number __________________
Cell phone (country code______) (area code_______) Number __________________
Fax ___________________ e-mail ____________________________________

3. Education

<table>
<thead>
<tr>
<th>Institute</th>
<th>Location</th>
<th>Year</th>
<th>Field of Expertise</th>
<th>Degree</th>
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<tr>
<td>Higher Education</td>
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<td>Academic Degrees: First</td>
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<td>Third</td>
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4. Other studies / courses / seminars relevant to the program (Last 10 years)

<table>
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<tr>
<th>Subject of course</th>
<th>Country</th>
<th>Organized by</th>
<th>Duration of studies</th>
<th>Year</th>
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5. Previous Studies in Israel

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<tr>
<th>Subject of course</th>
<th>Year</th>
<th>Training Institute</th>
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6. **Computer Proficiency**

No_____ Yes_____  
If yes, please specify (Word, Excel, etc.)_____________________________________

7. **Knowledge of languages**

Mother Tongue________________________________________

<table>
<thead>
<tr>
<th>Language of the program</th>
<th>Reading</th>
<th>Speaking</th>
<th>Writing</th>
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<td>Fair</td>
<td>Good</td>
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</table>

8. **Employment**

Full Name of Institution_____________________________________________________

Type of Institution: Government / NGO / Private / Other___________

Address ______________________________________________________________

Telephone_____________________ Fax: ______________ e-mail _______________

Present Position and description of your responsibilities_____________________

__________________________________________

9. **Former places of Employment**

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>Dates From-To</th>
<th>Position held</th>
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10. References: Please list two people who are acquainted with your professional qualifications

Reference 1

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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**Telephone number**

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<th>Country code</th>
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**Cell phone number**

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**Fax number**

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**e-mail address**

Reference 2

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<th>Name</th>
<th>Position</th>
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**e-mail address**

Name of applicant _________________________
DECLARATION

TRAINING PROGRAM ____________________________ Date ________________

I, the undersigned, Mr./Mrs./Miss ____________________________ of (country) ________ in submitting my application for study and/or training in Israel as described earlier, declare as follows:

(A) I UNDERSTAND that it is the intention of the government of Israel to enable me, if I should be found suitable, to participate in a period of study and/or training in Israel as part of the cooperation between the Government of Israel and my country.

(B) I AM FULLY AWARE that the training opportunity given to me is designed for the benefit of my country’s development. I, therefore, pledge to participate fully in all studies offered and to comply with all regulations established by the professional institution hosting the training program.

(C) I CLEARLY UNDERSTAND that the purpose of my visit to Israel is to study and/or train. Therefore I will refrain during my stay in Israel from engaging in any political activity and/or gainful employment.

(D) I AM FULLY AWARE that my stay in Israel may be discontinued if I should commit any infraction of my undertaking in this declaration, and/or of the Israel civil or criminal law, and/or break the rules and regulations of the school or institute where I will be studying and/or training.

(E) I UNDERTAKE to return to my country upon the completion of my studies, as stipulated by the Government of Israel and the supervisors of my training program.

(F) I UNDERSTAND that the Government of Israel cannot in any way be held responsible for the material needs of my family during my stay in Israel, nor for my employment upon my return to my country.

(G) I AM FULLY AWARE that the legal, financial, and moral responsibility of the Government of Israel ends with the conclusion of the training program.

(H) I AM - to the best of my knowledge - of healthy body and mind and do not require any medical treatment or attention.

(I) I UNDERTAKE to submit to a further medical examination before or during my studies when required to do so by the Government of Israel.

(J) I AM FULLY AWARE that the institute does not bear any responsibility whatsoever for my money, valuables, documents etc. Similarly, the institute bears no responsibility whatsoever for loss of money, valuables, documents, etc.

(K) (FOR WOMEN) I AM NOT - to the best of my knowledge - pregnant, and I understand that I am liable to be sent home in case of pregnancy.

(L) I UNDERSTAND that the organizers do not accept any responsibility for the treatment of chronic diseases, dental treatment or eye glasses during my stay in Israel.

(M) I ALSO UNDERSTAND that my personal belongings are not insured by the organizers.

(N) I HEREBY CERTIFY that all information and documents presented are correct and truthful.

(O) I AM FULLY AWARE that it is my responsibility to obtain the name and location of the Israeli institute to which I am going, its address and how to arrive there.
(P) I UNDERSTAND that all the financial arrangements have been finalized with the Israeli Representative before my arrival in Israel.

(Q) I FULLY UNDERSTAND that, unless stated otherwise, the insurance policy under which I shall be insured by the Israeli institute covers me only during the period of the course/program within the area of the State of Israel.

I confirm hereby my full agreement to these conditions.

Name and surname of applicant__________________________________________________

Signature of applicant ___________________________________

Date _______________ Place _____________________________

Please write a short paragraph describing your expectations from the training program including the direct contribution of the program to your field of work, as well as future plans after completion of the program.

______________________________________________________________________________
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Please write a very short autobiography

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# Declaration of State of Health

This form is designed for men and women alike. Please fill out this form accurately and completely.

**Name:** __________________________________________________________________________
**Passport no.:** _______________________________________________________________________
**Date of birth:** ______________________________________________________________________

Please answer the following questions by marking the appropriate box.

## A Health Statement

<table>
<thead>
<tr>
<th>Have you been referred during the last two years for medical and/or diagnostic tests that have not yet been completed and regarding which no final diagnosis has been made, involving any of the following procedures: catheterization, scanning, echocardiography, MRI, CT, ultrasound (other than as part of routine prenatal monitoring), biopsy, occult blood, colonoscopy, gastroscopy, blood tests, urine tests?</th>
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</thead>
<tbody>
<tr>
<td>Yes</td>
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<table>
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<tr>
<th>Have you been diagnosed with a disease, condition, or disorder associated with one or more of the following:</th>
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<tbody>
<tr>
<td>Nervous system (neurology) and brain: nervous system, CVA (cerebrovascular accident), multiple sclerosis, muscular dystrophy</td>
</tr>
<tr>
<td>Renal failure</td>
</tr>
<tr>
<td>Respiratory system: COPD (chronic obstructive pulmonary disease), cystic fibrosis</td>
</tr>
<tr>
<td>Malignant disease or tumor (cancer)</td>
</tr>
<tr>
<td>Disease of the immune system: Lupus</td>
</tr>
<tr>
<td>Heart disease</td>
</tr>
<tr>
<td>Sexually-transmitted disease (including AIDS and/or HIV carrier)</td>
</tr>
<tr>
<td>Infectious diseases:</td>
</tr>
<tr>
<td>Tuberculosis</td>
</tr>
<tr>
<td>Hepatitis B virus</td>
</tr>
<tr>
<td>Hepatitis C virus</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Have you been diagnosed as suffering a mental disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
</tbody>
</table>

For women only - Are you pregnant

Signature of Applicant: __________________________________________________________________________ Date: __________________________________________________________________________

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# Declaration of the Insurance Applicant

1. The information included in this document is essential in order to insure you under the policies and for all other matters related to policies and their handling. The Company and other companies in the Harel Group (Harel Insurance Investments and Financial Services Ltd. and its subsidiaries) and/or anyone on their behalf will use it, including processing, storing, and using it for any matter related to the policies and other legitimate purposes, including the provision of the information to third parties acting on behalf of and in the name of the Harel Group.

2. I/we hereby declare that all the answers are correct and full and have been provided of my/our own free will.

3. The answers specified in the Health Declaration and any other information provided to the company, as well as the accepted terms of the company regarding this matter shall serve as fundamental terms of the insurance contract between you and the company and shall constitute an integral part therefore.

4. The company is permitted to decide whether to accept or deny your application. For your information, the insurance contract will become effective only after the company issues written confirmation of acceptance of all the applicants for insurance.

5. **Waiver of medical confidentiality:** I, the undersigned, hereby give permission to the HMO (kupat holim) and/or its medical institutions and/or the all other physicians and psychiatrists, medical institutions and hospitals, and/or any other insurance company and/or any institution and other party, insofar as necessary in order to examine the rights and obligations according to the policy and/or for the purpose of the procedure of examining of my acceptance for the insurance requested, to provide Harel with all the information and details held by the company, without exception, in the form requested by the Requester/s, regarding my health condition, including any disease that I suffered from in the past and/or that I suffer now and/or that I will suffer in the future, and I relieve you from the duty of maintaining medical confidentiality and waive confidentiality in favor of the “Requester”. This waiver is binding of my/our estate and my legal representatives and anyone substituting for me.

Signature of Applicant: __________________________________________________________________________ Date: __________________________________________________________________________