

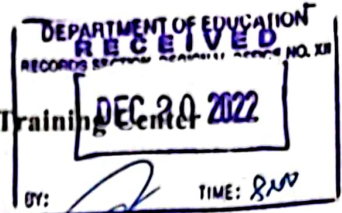
MASHAV - Israel's Agency for International Development  
Cooperation



STATE OF ISRAEL

with

The MASHAV Educational Training Center



Is inviting professionals  
to participate in the

## Educators Professional Development

### In Service Training

19.2-8.3.2023



Israel's Agency for International  
Development Cooperation  
Ministry of Foreign Affairs



*"The test of truth in life is not whether we can remember what we learned in school, but whether we are prepared for change."*

Andreas Schleicher- Director for Education and Skills OECD

The rapid changes, which characterize the times we live, impose a considerable challenge to the educational systems around the world. As questions and concerns about unprecedented social and economic challenges became increasingly urgent, these systems need to consider developing education for the best future carefully. The Educational System must perceive the Professional Development of their Educators as a main field in which to invest.

Focusing on the importance of ongoing professional development aimed to successfully change their practices to lead to meaningful change in learning outcomes; educators need they to be encouraged to view themselves as change actors facing new challenges and opportunities to trained through institutional support.

Topics include:

- Presentation of diverse forms of training and adaptation to changes in the educational system; including latest concepts, methods, and tools for educational staff training
- Analysis of different modules for educators training and defined training goals
- Design of integrative teaching/learning units
- Presentation of additional resources for self-development and enrichment
- Examination of the principal's role as school leader, including a discussion of teamwork, creating a school vision, school budgets and administration, and empowerment of teachers
- Provision of setting up support systems such as pedagogical centers for facilitators and teachers
- Practice for motivating and empowering teachers and improving pedagogical skills:
  - Self-reliance, self-learning, and self-evaluation
  - Teaching skills and tools for implementing curricula
  - Networking with other teachers and educators to enhance knowledge and broaden views and ideas
- Analysis of role and place of educational staff in national development
- Staff leadership, management, and professional development
- Frameworks and methods for using the Internet and ICT in education

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, 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.

#### **Aims**

- To provide new tools and knowledge on the implementation and development of educators professional aspects.
- To provide frameworks as an answer to the differences between the teaching staff, between the different professions and allow each teaching staff to choose the learning path that suits them
- To create tools for communication, collaboration and team work.
- 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.

#### **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

#### **Social Activities and Tours**

The seminar includes an organized tour of holy sites and locations of general and historical interest.

#### **Audience**

The course is designed for policy makers and practitioners, such as Directors in Education Departments of Ministries of Education and local authorities, Educational Trainers Principals of primary and secondary schools, Coordinators in primary and high schools, Lecturers in Teacher educational Institutions.



## 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 until 10.1.2023**

## General Information

### Arrival and Departure

Arrival date: 19.02.2023  
Opening date: 20.02.2023  
Closing date: 07.03.2023  
Departure date: 08 .03.2023

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 vaccinated against Covid 19 and Tetanus the last one in the last ten years. Subject to the full binding policy conditions, Participants are responsible for all other expenses.

### Place

The course will be held at METC - MASHAV Educational International Training Center, situated in the Ramat Rachel Hotel on the outskirts of Jerusalem. The accommodation will consist of double rooms (two participants per room).

## About MASHAV

MASHAV - Israel's Agency for International Development Cooperation-Ministry of Foreign Affairs of Israel 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 environmentally sustainable development, and it is taking an 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. The seconding of short and long-term experts as well as on-site interventions supports project development. 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 METC - A. Ofri Mashav Educational Training Center

A. Ofri Mashav Educational Training Center, was established in 1989 as a professional extension of MASHAV - Israel's Agency for International Development Cooperation-Ministry of Foreign Affairs of Israel. 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, METC 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.

Website: [www.ofri.org.il](http://www.ofri.org.il)





**MASHAV**  
Israel's Agency for International Development Cooperation  
Ministry of Foreign Affairs  
Jerusalem

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.

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**FOR OFFICIAL USE ONLY**

שגרירות/ נציגות ישראל במדינת \_\_\_\_\_ תאריך קבלת השאלון \_\_\_\_\_

ראיינתי את המועמד/ת שם פרטי \_\_\_\_\_ שם משפחה \_\_\_\_\_  
אישית/טלפוני

הערכת המועמד/ת והתאמה  
לקורס: \_\_\_\_\_

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חתימה

תפקיד

שם  
חותמת השגרירות

- נא לשלוח עותק אחד במייל לחש"ב ובמקביל לשלוח עותק במייל לשלוחה הרלוונטית.  
עותק קשיח יישאר בנציגות.
- שאלונים שלא יחולאו במלואם כולל חלק זה בעברית לא יטופלו.

**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**

	Institute	Location	Year	Field of Expertise	Degree
Higher Education					
Academic Degrees: First					
Second					
Third					

**4. Other studies / courses / seminars relevant to the program (Last 10 years)**

Subject of course	Country	Organized by	Duration of studies	Year

**5. Previous Studies in Israel**Passport  
Photo

Subject of course	Year	Training Institute

Name of applicant \_\_\_\_\_

**6. Computer Proficiency**

No \_\_\_\_\_ Yes \_\_\_\_\_

If yes, please specify (Word, Excel, etc.) \_\_\_\_\_

**7. Knowledge of languages**

Mother Tongue \_\_\_\_\_

Language of the program	Reading			Speaking			Writing		
	Fair	Good	V. Good	Fair	Good	V. Good	Fair	Good	V. Good

**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**

Name of Institution	Dates From-To	Position held



Name of applicant \_\_\_\_\_

**10. References:** Please list two people who are acquainted with your professional qualifications

**Reference 1**

Name			Position		
Telephone number			Cell phone number		
Country code	area code	number	Country code	area code	number
Fax number			e-mail address		
Country code	area code	number			

**Reference 2**

Name			Position		
Telephone Number			Cell phone Number		
Country code	area code	Number	Country code	area code	Number
Fax Number			e-mail address		
Country code	area code	Number			

**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.



First name: \_\_\_\_\_ Last name: \_\_\_\_\_  
Passport no. \_\_\_\_\_ Date of birth: \_\_\_\_\_

Please answer the following questions by marking the appropriate box.

A Health Statement		yes	no
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?			
<b>Have you been diagnosed with a disease, condition, or disorder associated with one or more of the following:</b>			
Nervous system (neurology) and brain: nervous system, CVA (cerebrovascular accident), multiple sclerosis, muscular dystrophy			
Renal failure			
Respiratory system: COPD (chronic obstructive pulmonary disease), cystic fibrosis			
Malignant disease or tumor (cancer)			
Disease of the immune system: Lupus			
Heart disease			
Sexually-transmitted disease (including AIDS and/or HIV carrier)			
Infectious diseases:			
Tuberculosis	<input type="checkbox"/> yes <input type="checkbox"/> no		
Hepatitis B virus	<input type="checkbox"/> yes <input type="checkbox"/> no		
Hepatitis C virus	<input type="checkbox"/> yes <input type="checkbox"/> no		
Have you been diagnosed as suffering a mental disease			
For women only - Are you pregnant			
Signature of Applicant: _____		Date: _____	

B Declaration of the Insurance Applicant	
<p>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.</p> <p>2. I/we hereby declare that all the answers are correct and full and have been provided of my/our own free will.</p> <p>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.</p> <p>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.</p> <p>5. <b>Waiver of medical confidentiality:</b> 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.</p>	
Signature of Applicant: _____ Date: _____	

Standard form 10580/14610