

EADSG  
East Africa Diabetes Study Group

# ILONDO MBELENGE MAPOKO PRIZE & LECTURE

Prize to recognise research contributing to the advancement of knowledge in endocrinology and diabetes.



CONGRESS & SCIENTIFIC SESSIONS

**28<sup>TH</sup> – 31<sup>ST</sup> MAY 2025**

@SPEKE CONVENTION CENTER, MUNYONYO, KAMPALA – UGANDA

Important! Please send your information as one complete PDF email attachment by 12:00 noon (EAT) on the deadline date to: [eadsg2025@edsg.org](mailto:eadsg2025@edsg.org)



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## Nomination Form

**Deadline for Applications: 15 March 2025, 12:00 noon (EAT)**

**Important! Please send your nomination as one complete PDF email attachment by 12:00 noon (EAT) on the deadline date, to: [eadsg2025@eadsg.org](mailto:eadsg2025@eadsg.org)**

**We need an electronic copy only, please do not send paper copies**

You will receive an email acknowledging receipt of your application within three working days of submission. Should you have not received confirmation by then please contact the EADSG Office.

### **General Information:**

- Throughout the complete application, please use Arial 12-point font with single line spacing.
- Candidates must be an EADSG Member. If not yet a member, kindly apply to be one.
- Candidates should be resident in East Africa and
- Candidates should be younger than 45yrs in the year of nomination and/or
- their MD or PhD degree should have been obtained within the last 15 years
- Board Members of EADSG are not eligible for nomination



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## 1. Basic Information

Please note that EADSG may be contacting you or the nominee both by surface and email. Therefore a complete postal address should be provided. If there is more than one nominator, only the details of the principal nominator are needed. EADGS will contact the principal nominator only.

### **Nominee:**

Title (Dr, Prof): \_\_\_\_\_

First Name/Second Name: \_\_\_\_\_

Address of the institute  
Institution name: \_\_\_\_\_

Postal Address: \_\_\_\_\_

Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

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

EADSG Membership Number: \_\_\_\_\_

### **Nominator:**

Title (Dr, Prof): \_\_\_\_\_

First Name/Second Name: \_\_\_\_\_

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

Address of the institute  
Institution name: \_\_\_\_\_

Postal Address: \_\_\_\_\_



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## 2. Letter of Recommendation (Max 1000 words)

Please insert one Letter of Recommendation only. **Further letters will be disregarded.** The letter may be signed by several nominators and contain references.



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### 3. CV

This part must not exceed 3 pages in Arial 12 point, single line spacing. List the nominee's education and employment in **reverse chronological order**: