WMO OMM

02190/2019/WDS/SDD/RAV-SIDS-IBFWS



World Meteorological Organization Organisation météorologique mondiale Organización Meteorológica Mundial Всемирная метеорологическая организация المنظمة العالية للأرصاد الجوية 世界气象组织

Secrétariat

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28 January 2019

Annex: 2

Our ref.:

Subject: Impact Based Forecast and Warning Services (IBFWS) Workshop for the Pacific Small Island Developing States (SIDS) of WMO RA V, Honiara, Solomon Islands, 29 April – 3 May 2019

Action required: To nominate participants

Dear Sir/Madam,

I am pleased to inform you that at the kind invitation of the Government of Solomon Islands, WMO through the Public Weather Services Delivery (PWSD) Programme is organizing the Impact Based Forecast and Warning Services (IBFWS) Workshop for the Pacific Small Island Developing States (SIDS) of WMO RA V, to be held in Honiara, Solomon Islands from 29 April to 3 May 2019. The workshop will be conducted in English only.

The main objective of the Workshop is to provide training on IBFWS for the Pacific Small Islands Developing States (SIDS) of WMO RA V and to encourage Members to implement IBFWS. Participants will take part in practical sessions, essential for the appreciation of IBFWS which will include developing (a) hazard matrices for primary, secondary and tertiary hazards that impact their particular areas , (b) impact matrices including classification in terms the impact severity, and (c) mitigation advice matrices for each hazard, among other topics.

In this regard, I would like to invite you to nominate a forecaster from your Service and a self-supported participant from the Disaster Management Authority to attend the workshop. Nomination forms are enclosed herewith (see Annexes) for this purpose.

It is hoped that your Government would consider covering the cost of the abovementioned nominated participants. However, upon request, WMO could consider providing financial support (travel (most direct and economical route) and/or per diem) for the participation of the nominated forecaster only from your Service.

In order to clarify WMO's insurance coverage for non-staff members, please advise your nominee, before they undertake travel, as follows:

"In the case of non-staff members of the Organization who are authorized to travel at its expense and/or who are receiving a daily subsistence allowance, the WMO accepts limited responsibility for compensation in the event of death, illness or injury attributable to attendance at meetings or the performance of services on behalf of the Organization. These persons therefore remain fully responsible for any expenses incurred as a result of events which are not attributable to attendance at meetings or performances of services on behalf of the Organization and for

- To: Permanent Representatives (or Directors of Meteorological or Hydrometeorological Services) of Cook Islands, Fiji, Kiribati, Nauru, Niue, Palau, Marshall Islands, Samoa, Tokelau, Tonga, Tuvalu and Vanuatu
- cc: Permanent Representative of Solomon Islands with WMO

arranging such life, health and other forms of insurance as they consider appropriate".

For administrative purposes, I should be grateful if you could notify the WMO Secretariat on or before **21 February 2019**, of the attendance of your nominated participants and whether financial assistance would be required.

I would like to express my appreciation for your continued support in promoting the Programmes and activities of WMO.

Yours faithfully,

(W. Zhang) for the Secretary-General



 Secrétariat

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Annex 1

IMPACT BASED FORECAST AND WARNING SERVICES (IBFWS) WORKSHOP FOR THE PACIFIC SMALL ISLAND DEVELOPING STATES (SIDS) OF WMO RA V

Honiara, Solomon Islands, 29 April to 3 May 2019

NMHS FORECASTER NOMINATION FORM (use one form per participant)

The Permanent Representative of participate on the above training workshop:

with WMO nominates the following candidate to

Mr/Mrs/Ms/Dr:	
Family name:	
First name(s):	
Date of birth:	
Present position and responsibilities:	
Work address:	
Work Tel:	
Work Fax:	
Email:	
Education/Qualification:	
Experience:	

Please indicate if financial assistance is required for:

Air Ticket	:	NO D or YES D	
Per Diem	:	NO D or YES D	
Date:		Name of Permanent Representative:	

Signature of Permanent Representative: _____

Please complete and submit this registration form by e-mail to Ms Catherine Bezzola (<u>CBezzola@wmo.int</u>) with cc to Mr Samuel Muchemi (<u>SMuchemi@wmo.in</u>) as soon as possible, but **not later than 28 February 2019**)

To enable us to provide you with the best service please complete <u>all the fields</u> by computer and send us an electronic copy



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Annex 2

IMPACT BASED FORECAST AND WARNING SERVICES (IBFWS) WORKSHOP FOR THE PACIFIC SMALL ISLAND DEVELOPING STATES (SIDS) OF WMO RA V

Honiara, Solomon Islands, 29 April to 3 May 2019

DISASTER MANAGEMENT AUTHORITY NOMINATION FORM (use one form per participant)

The Permanent Representative of participate on the above training workshop:

with WMO nominates the following candidate to

Mr/Mrs/Ms/Dr:	
Family name:	
First name(s):	
Date of birth:	
Present position and responsibilities:	
Work address:	
Work Tel:	
Work Fax:	
Email:	
Education/Qualification:	
Experience:	

Date: _____ Name of Permanent Representative:

Signature of Permanent Representative:

Please complete and submit this registration form by e-mail to Ms Catherine Bezzola (<u>CBezzola@wmo.int</u>) with cc to Mr Samuel Muchemi (<u>SMuchemi@wmo.in</u>) as soon as possible, but **not later than 28 February 2019**)

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