

**WMO OMM**

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

**Secrétariat**

7 bis, avenue de la Paix – Case postale 2300  
CH 1211 Genève 2 – Suisse  
Tél.: +41 (0) 22 730 81 11  
Fax: +41 (0) 22 730 81 81  
wmo@wmo.int – public.wmo.int

Our ref.: 08389/2024/I/WIS 2.0 Fiji

15 May 2024

Annexes: 2

Subject: WIS 2.0 Training Workshop, Fiji, 7-11 October 2024

Action required: To inform the Secretariat of the participation of your representative as soon as possible, but no later than **14 June 2024**

Dear Sir/Madam,

It is my pleasure to inform you that the World Meteorological Organization plans to organize a training workshop on WIS 2.0 in Fiji, from 7 to 11 October 2024. The training aims to address the capacity-building needs of the Pacific SIDS.

The purpose of this training is to help WMO Members in building capacity by:

- (1) Raising understanding of the WIS 2.0 architecture.
- (2) Developing skills to install and configure the WIS2 box software.
- (3) Developing skills to operate a WIS2 node.

The training is designed to be practical and highly interactive. Participants will be expected to work independently or in groups on these and other activities. Each participant needs to have an individual laptop to participate in practical sessions during the training. The workshop will be conducted in English.

You are kindly invited to nominate, from your service, one representative (preferably an IT engineer involved in software development and computer programming) to attend the training workshop.

It would be helpful if you could find internal resources to support the participation of your expert fully, or partially. However, if required, WMO will consider providing financial support within the limited resources available.

Regarding insurance coverage for non-staff members, may I draw your attention to the following:

*Non-staff members of WMO who are authorized to travel at the Organization's expense and/or who are receiving a DSA from WMO must ensure they are fully responsible for expenses incurred in the event of death, illness or injury during official travel and attendance at meetings on behalf of the Organization. They are, therefore, fully responsible for arranging life, health, accident, as well as any other forms of insurance with an adequate level of coverage for the duration of such meetings and events.*

For administrative purposes, I should be grateful if you could kindly confirm the participation of your representative in the training workshop at your earliest convenience, but preferably not later than **15 June 2024**, and indicate whether financial assistance will be

To: Permanent Representatives of the Cook Islands, the Federated States of Micronesia, Kiribati, Nauru, Niue, Palau, Papua New Guinea, the Republic of Marshall Islands, Samoa, Solomon Islands, Tokelau, Tonga and Vanuatu with WMO (limited distribution)

required. If so, please complete, sign, and return the enclosed Request for Financial Assistance (RFA) form ([Annex 1](#)) to the Secretariat at [mrequests@wmo.int](mailto:mrequests@wmo.int) with a copy to [wis@wmo.int](mailto:wis@wmo.int). If WMO meets the travel costs, the travel arrangements will be made by the Secretariat and details will be sent to your representative in due course.

In addition, you are kindly requested to inquire about an entry visa to Fiji and check with the concerned travel agent if a transit visa is required with your itinerary. If necessary, WMO can provide a formal invitation letter in support of a visa application; for this purpose, the attached Request for Travel Visa Support form ([Annex 2](#)) needs to be completed and returned to the Secretariat at [registration@wmo.int](mailto:registration@wmo.int) with a copy to [wis@wmo.int](mailto:wis@wmo.int).

I take this opportunity to thank you for your support in WMO activities.

Yours faithfully,

A handwritten signature in dark ink, appearing to read 'Ko Barrett', with a stylized flourish extending to the right.

Ms Ko Barrett  
for the Secretary-General



WORLD  
METEOROLOGICAL  
ORGANIZATION

# REQUEST FOR FINANCIAL ASSISTANCE

Ref.: 08389/2024.1.7 I/WIS

<p align="center"><b>WIS 2.0 Training Workshop</b>  <b>Fiji</b>  <b>7 -11 October 2024</b>  <b>I/WIS</b></p>
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Please complete this form in block letters by typing only (no handwriting).  
 Return it to: [mrequests@wmo.int](mailto:mrequests@wmo.int) (cc: [wis@wmo.int](mailto:wis@wmo.int)) with a copy of your passport **before 15 June 2024**

## 1. PARTICIPANT

Please complete the following **MANDATORY** information exactly as it appears in your passport:

Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>		
FAMILY NAME			
MAIDEN NAME (if applicable)			
First Name			
Nationality			
Place of birth		Date of birth (DD/MM/YY)	
Passport number		Validity (DD/MM/YY)	
Holding US visa	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not applicable <input type="checkbox"/>
Schengen visa	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not applicable <input type="checkbox"/>
Address			
City		Postal code	
Country		Nearest departure airport	
Mobile phone number		Office phone number	
E-mail			

## 2. ASSISTANCE FROM WMO FOR TRAVEL

Assistance requested: ☐ yes ☐ no

## 3. ASSISTANCE FROM WMO FOR DAILY SUBSISTENCE ALLOWANCE (DSA)

50% of DSA will be recovered by the organization if no accommodation invoice is provided.

DSA requested ☐ yes ☐ no

**Bank transfer, please indicate full bank details:**

- (i)
- ☐
- CHF**
- Swiss Francs,
- ☐
- USD**
- US Dollars,
- ☐
- EUR**
- Euros currencies

Name of the bank:	
Address:	
Name of account holder	
Account number	
SWIFT Code	
ABA Code (USA)/BSB(AUD)	
SORTCode (UK)/Transit (CAD)	
IBAN Code/ CLABE(MEX)	

**If bank transfer is NOT possible:**

- (ii) Payment by Swiss Bankers Card\* ☐ **CHF**, ☐ **USD**, ☐ **EUR**
- (iii) Payment by reloading of existing Swiss Bankers Card in my possession  
☐ **CHF**, ☐ **USD**, ☐ **EUR**
- (iv) Through UNDP Office (**USD**) ☐.

**4. INFORMATION ON SUPPORT RECEIVED IN ADDITION TO WMO ASSISTANCE****4.1 Declaration**

No additional support received ☐ OR Additional support received ☐

**4.2 Information**

In case additional support is received, please indicate type of funding and estimated value:

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**5. APPLICABLE RULES AND INSTRUCTIONS**

The travel shall be conducted in accordance with relevant WMO rules and instructions. An excerpt of these is provided in the Annex to this form. Please read it carefully.

By signing this form, I confirm that:

- ☐ The information I have provided is correct;
- ☐ I shall comply with the relevant WMO rules and instructions;
- ☐ It is my responsibility to make arrangements for health insurance;
- ☐ It is my responsibility to ensure that the required medical clearance is obtained before traveling;
- ☐ It is my responsibility to obtain all necessary visas;
- ☐ If I do not attend/participate in the meeting, I will return any travel advance that I have received, and if the travel advance exceeded the amount of reimbursable travel expenses, I shall refund WMO the difference.

**Signature of the participant:** ..... **Date:** .....

## ANNEX

### Excerpt from applicable rules and instructions

In accordance with WMO travel rules, air travel shall be provided in economy class, for the most economical and direct route.

If you are unable to travel after the ticket has been issued, you must inform the WMO travel agency (at: [wmo.ch@contactcwt.com](mailto:wmo.ch@contactcwt.com)) prior to departure. Please also inform [mrequests@wmo.int](mailto:mrequests@wmo.int) and [travel@wmo.int](mailto:travel@wmo.int) as soon as your travel is cancelled.

#### Visas

It is the traveller's responsibility to ensure that all required official travel documents are valid and accurate in order to obtain the necessary visa(s) for the destination, transit stops prior to departure.

#### Medical clearance

Medical clearance is a mandatory requirement for all travellers whose official travel is paid for by WMO in order to certify that they are medically fit to travel. It is the traveller's responsibility to ensure that the required medical clearance and vaccinations are obtained before travelling.

#### Insurance

As per the regulations related to insurance in the chapter 6 of the Standing Instruction on WMO official travel, non-staff members retain the primary obligation to ensure that they have the appropriate medical and travel insurance coverage when travelling on behalf of WMO, which means that if any health or travel related eventuality should occur the non-staff members should seek assistance and claim their coverage from an insurance policy that they have taken out, as per the following regulation :

"Non-staff members of WMO who are authorized to travel at the Organization's expense and/or who are receiving a DSA from WMO must ensure they are fully responsible for expenses incurred in the event of death, illness or injury during official travel and attendance at meetings on behalf of the Organization. They are, therefore, fully responsible for arranging life, health, accident, as well as any other forms of insurance with an adequate level of coverage for the duration of such meetings and events. WMO liability, which is directly attributable to the performance of services or attendance at a meeting on behalf of the Organization, is covered by an injury and illness benefit insurance which provides a limited coverage for medical, emergency and supplementary official travel expenses".

Travellers should note that WMO Regulations and Rules do not cover additional costs arising from the prolongation of stay of experts or other costs arising from travel restrictions imposed by national authorities. As with related health insurance provisions it is incumbent on the traveller to ensure that they retain the necessary travel insurance protection to cover unexpected occurrences such as border closures or other travel restrictions.

#### Insurance policy in relation to travel by car

Official travel by private vehicle will not be covered under the WMO Staff compensation and/or Benefits insurance policies. Travellers who choose to use a private vehicle for official travel should arrange for sufficient coverage with their car insurance provider for damages caused to both the vehicle and the occupants. This applies to personal vehicles as well as rental cars.

### **Ticket purchased through our WMO travel agency**

The proposed itinerary is based on official travel dates and the traveller must accept or refuse this itinerary within 24 hours.

Once the proposed itinerary is confirmed, the traveller must ensure that an "Electronic Ticket" is received.

### **Deviations from the proposed official itinerary**

For any deviation from the official itinerary proposed by WMO travel agency, the traveller should **directly** contact the travel agency, either by phone or e-mail to make the necessary arrangements.

FYI: CWT e-mail: [wmo.ch@contactcwt.com](mailto:wmo.ch@contactcwt.com),

CWT phone number: (24/7) +41 58 515 00 78

Any additional cost resulting from a private deviation request will be borne by the traveller. Deviations for personal convenience can be undertaken by the traveller purchasing their own tickets based on the WMO financial liability as per the standard cost or the cost of the itinerary proposed by the travel agency if such an itinerary has been requested. In these cases, the actual cost of the self-purchased ticket will be reimbursed by WMO.

### **Self-purchase of official travel tickets**

Individuals travelling on behalf of WMO or whose official travel is paid for by WMO are authorized to purchase their own tickets. In this case,

- (a) Tickets can be purchased by travellers and will be reimbursed up to the actual cost paid by the traveller provided that the cost is within the financial liability as per the standard cost or the cost of the itinerary proposed by the travel agency, if such an itinerary has been requested;
- (b) In the event that there are changes to the planned official travel, the traveller is responsible for managing any associated change and refund requests by dealing directly with the ticket provider and for covering any extra charges related to these changes;
- (c) Travellers who have purchased their own tickets and are unable to travel for reasons of *force majeure* may be reimbursed the cost of the purchased tickets. Requests for reimbursement shall be justified in writing by the traveller and approved by the certifying officer;
- (d) Claims for reimbursement must be supported by the invoice paid by the traveller and/or proof of the official travel, if any.

### **Travel claims**

Individuals travelling on behalf of WMO or whose official travel is paid for by WMO shall, within two calendar weeks after completion of the official travel, submit a completed official travel reimbursement claim, with supporting documents, including hotel invoices and boarding passes. Recovery of official travel advances (or "due to") shall be initiated if an individual travelling on behalf of WMO fails to submit a duly completed claim together with the supporting documents, or if, on review of the claim, it is determined that the official travel advance exceeded the amount of reimbursable official travel expenses.

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Ref.: 08389/2024.I.7 I/WIS

<p align="center"><b>Training workshop on WIS 2.0</b>  <b>7-11 October 2024, Fiji</b></p> <p><b>PLEASE RETURN THIS FORM AS SOON AS POSSIBLE TO <a href="mailto:registration@wmo.int">registration@wmo.int</a> (cc: <a href="mailto:wis@wmo.int">wis@wmo.int</a>)  <b>TOGETHER WITH (1) A SCAN OF YOUR NATIONAL PASSPORT and (2) INDIVIDUAL INVITATION LETTER</b></b></p>
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**REQUEST FOR TRAVEL VISA(S) WITH THE ASSISTANCE OF WMO**  
**To be completed by the Participant**

Please note, WMO can, if required and upon request, send a letter to the Embassy or Consulate concerned, indicating that you will participate in the above-mentioned meeting.

This letter is sent to the Embassy/Consulate exclusively by e-mail. In order to prepare the letter, a copy of the passport id page is required.

Please submit this form as early as possible, as in some cases there is a considerable delay to process.

<b>PLEASE PROVIDE THE FOLLOWING INFORMATION EXACTLY AS IT APPEARS IN YOUR PASSPORT</b>	
MR / MS / PROF	
FAMILY NAME	
FIRST NAME	
PASSPORT NO.	
DATE OF BIRTH	
DATE OF ISSUE	
DATE OF EXPIRY	

<b>PROFESSIONAL ADDRESS</b>	
ORGANIZATION	
SECTION / DIVISION /	
STREET	
CITY & COUNTRY	
<b>E-MAIL (ESSENTIAL)</b>	
TEL	

<b>CONTACT DETAILS OF THE EMBASSY/CONSULATE ISSUING THE ENTRY VISA FOR THE MEETING</b>	
EMBASSY OF	
CITY	
COUNTRY	
<b>E-MAIL (ESSENTIAL)</b>	

<b>CONTACT DETAILS OF THE EMBASSY/CONSULATE ISSUING A TRANSIT VISA</b>	

DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_