**Short summary of submissions:**

I, [First name, Last name] am submitting the following documents in support of my ISWP WSP Certification:

1. Letter from my supervisor [date of the letter]
2. Course or training completion certificate (e.g. Wheelchair Service Training Package (WSTP) at the basic level) [date of the certificate]. \*Include the duration in hours of the course(s) if it is not explicitly stated in the evidence submitted.
3. Degree [date of the certificate]. \*If you don’t have a university/professional degree/diploma, please mention your highest level of education.
4. Professional Licenses (if applicable in your context) [date of the certificate]. \*If a license is not required for your professional practice, please mention it.
5. Resume in English [Date of last update]