

# ADVANCED COURSE ON DIAGNOSTICS

8/12 November 2010

Les Pensières, Veyrier-du-Lac, Annecy, France

Organized by Fondation Mérieux  
and the London School of Hygiene and Tropical Medicine

**APPLICATIONS MUST BE RECEIVED BEFORE 30 SEPTEMBER 2010 AT MIDNIGHT**

## Application Form

Be aware that participants are selected on the basis of information given in this form and on the accompanying recommendation letter (mandatory). Please answer each question clearly and completely. Type clearly. All relevant information should be included on this form. Send the filled form electronically by email to [katia.mielczarek@fondation-merieux.org](mailto:katia.mielczarek@fondation-merieux.org).

Last Name	.....
First name	.....
Sex (Male or Female)	.....
Age	.....
Country of Residence	.....
Present Post	..... .....
Institution/Agency/Company	..... .....
City	.....
Detailed Address	..... .....
E-mail (s)	..... .....
Telephone (work)	.....
Telephone (home)	.....
Fax	.....

If you are selected, who will pay for your travel, registration and accommodation fees? *Check appropriate boxes*

a- Your institute/ company	YES	NO
b- Yourself	YES	NO
c- You apply for a grant	YES	NO
d- You benefit from a grant from another organization / industry?: which one? .....	YES	NO
e- You apply for a fellowship covering travel, registration and accommodation fees (available only for <u>selected</u> participants from Developing Countries)	YES	NO
If you are selected, is your participation dependant on receiving one of the above mentioned grants?	YES	NO

### EDUCATION AND EXPERIENCE

Qualifications (start with most recent).

University/School (name/City)	From	To	Field of study	Degree

### PAST PROFESSIONAL EXPERIENCE

Qualifications (start with most recent)

Name of institution/company	From	To	Post

**Experience in diagnostics, present activities and decision-making responsibilities**

*Please indicate your most important diagnostics-related past experience and present activities. Give details on your present or future responsibilities with a particular emphasis on what relates to diagnostics strategies*

**How do you think that this course may impact on your career, on your institution/ company or on diagnostic strategies at national or regional levels**

*Why do you want to follow this course? Give details on your basic motivation?*

**List of your most important publications (if any; maximum 5):**

.....  
.....  
.....  
.....  
.....

- Since there will be no translation, participants must be able to fluently speak and understand lectures given in English. Can you confirm that you fulfill this requirement? YES NO

- Selected participants will be asked to confirm that they will attend the course on a full time basis during its whole duration, i.e. from Monday 8 November at 08:30 until Friday 12 May at 14:30 .  
- Please confirm that this requirement is well understood and that you agree

- How did you hear about this course? .....

Letter of recommendation Mandatory  
Please add a signed letter of recommendation from your Director/ head of your institute  
To be written on a separate paper with heading of the institute/company  
(must be sent before 30 September 2010, as pdf file)  
Applications that do not contain a letter of recommendation will not be evaluated by the Selection Committee.

*In case of particular problems, you may call Mrs Katia Mielczarek, Fondation Mérieux,  
Phone.: +33 (0) 4 72 40 79 45  
katia.mielczarek@fondation-merieux.org*