UEMS - SPECIALIST SECTION OF DERMATO-VENEREOLOGY

EUROPEAN BOARD DERMATO-VENEREOLOGY

APPLICATION FORM

UEMS European Board Examination - Diploma in Dermatology and Venereology
August 5 - 6, 2016, Frankfurt am Main, Germany

The deadline for receipt of application is 1st of June 2016 ("first come, first served")

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Family name    Title    First name
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Date of birth    Nationality
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University / Clinic / Institution
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Address (this address will be the one we use to post Your Diploma, therefore it must be the only proper one)
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Phone    Fax
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E-mail (which will be used for the correspondence)
□ Dermatologist    □ Dermato-Venereologist    □ Venereologist

Date of Board Certification in Dermato-Venereology / Venereology / Dermatology (in case You are Board Certified)

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Training centre (University, Institution): 
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Period of training in dermato-venereology / dermatology / venereology (years plus months):
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Name of Educational Supervisor (in your centre):
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Change of training centre / Cross-Border Training Centre (especially important, if Your training has been completed abroad):
Additional training programme:

- Clinical dermatology (for venereologists)  Period of training: …………………………………
- Other trainings (for dermatologists)  Period of training: …………………………………
  Period of training: …………………………………

Number of dermatovenereology-related publications: …………………………………………………………………

Fees:
New Candidates:     EUR 400.-
Repeaters:    EUR 400.-

The fee for the examination must be paid by acceptance of the application until the 1st of July 2016.
Please transfer the sum to the following account.
Please note that the applicant is responsible for all bank transfer charges, i.e. the sum that reaches the account
has to be 400 EUR.

Name of recipient: AISBL UEMS/S.Dermatology
Account number (IBAN): BE13 0016 7242 9439
BIC/SWIFT code: GEBABEBB
Bank name: BNP Paribas Fortis
Bank address: Montagne du Parc 3, B-1000 Bruxelles
Mandatory reference: Board examination fee/Name of the applicant

Date: ………………………………………… Signature: ……………………………………………………………

Required documents:
- Copy of Board Certification in either Dermatology / Dermato-Venereology / Venereology
- Letter of reference confirming time of training (from the chairman of the institution or programme
director, four years is the required training period)
- Curriculum vitae
- List of discipline-related publications from the last 5 years.

Please provide us with all required documentation by e-mail.

Address for the correspondence (post address and e-mail):

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