



香港腦癇學會

HONG KONG EPILEPSY SOCIETY

(Hong Kong Chapter of the International League Against Epilepsy)

APPLICATION FORM

Hong Kong Epilepsy Society Ltd Training Sponsorship-

13th ILAE School for Neuropathology and Epilepsy Surgery

Personal Information

Name of Applicant: _____ Sex: M/ F

Mailing Address: _____

Mobile Number: _____ Email: _____

Current Employment

Present position: _____

Institute/ Department: _____

Particulars of Conference/ Course

Proposed Conference/ Course

Place of Conference: _____

Organizer: _____

Date of Conference/ Course: _____

Oral presentation: Yes/ No

Poster presentation: Yes/ No

Signature: _____ Date: _____

For official use ONLY

Application supported: Yes/ No

Signature: _____ Date: _____