

ILAE

CEMA

Hurghada Winter School on EEG and Epilepsy

HURGHADA WINTER SCHOOL ON EEG AND EPILEPSY

27th February - 3rd March 2018

APPLICATION FORM

| | | |
|--|---------------------|------------------|
| First name: | Last (Family) name: | |
| Nationality: | Year of birth: | Gender: F / M |
| Current position | | |
| /affiliation: | | |
| Address: | | |
| E-mail: | Telephone: | |
| Specialty/degree: | Obtained in year: | |
| Training in EEG: Institute / Department: | | Number of years: |

Do you wish to apply for bursary (please check)? Yes ☐ No ☐

Will you be able to attend the course only if you receive bursary Yes ☐ No ☐

If you apply for bursary, please justify your request in the box below:

| |
|--|
| |
|--|

Please describe shortly why you would like to participate in this EEG course:

| |
|--|
| |
|--|

Please send the application form, a short CV (max. 2 pages + publication list)
and a recommendation letter to:

drhassanhosny@yahoo.com & khalid@misr2000online.net

Deadline for application: 25th January 2018