Enrolment form: Health and Medical Research Fund Briefing Session for the 2024 Open Call for Research Fellowship Scheme 6 November 2024 (3:00 pm - 4:30 pm)

* Information required		
Please indicate session(s) that you are going to attend *		
Personal Information		
Title * Ota	hers (please specify)	
First Name *		
Last Name *		
Position *		
Others (please specif	īy)	
Department *		
Organisation *		
Tel. (Mobile is preferred) *		
Email # *		
# ZOOM account email is preferred		
CME accreditation		
Apply for CME accreditation? *	Yes	No
CME appreditation for an alalists	If yes, please provide the following info	rmation -
CME accreditation for specialists and non-specialists doctors		
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CNE accreditation

Member ID

Are you a registered / enrolled nurse under the Nursing Council of Hong Kong and would like to apply for CNE points? * γ_{es} No