

Application Form



2nd Five-Day CHINA-USA Agricultural Injury Prevention Training Seminar, October 20-25, Sanya, Hainan, The People's Republic of China

Please type or print the information requested below.

Name _____

Degree _____

Professional Title _____

Department/Division _____

University/Hospital/Institution _____

Street Address _____

City _____ Province _____ Zip Code _____ - _____

Telephone _____ Fax _____

Email Address _____

Mailing Address

(All correspondence will be sent to this address. Please make sure this address will be current through October 19, 2008.)

_____ Yes, my department letter is included.

_____ Yes, my letter indicating the basis of my interest in the Seminar is included.

_____ Yes, a copy of my curriculum vitae is included.

_____ Yes, my digital photo is included

I, the undersigned, understand that the seminar can accommodate only a limited number of applicants and that an applicant who declines after acceptance denies another worthy applicant the opportunity to participate. **I therefore assure the Seminar Committee** that if accepted, I will participate in the full program of the seminar beginning at 8:00 am Monday, October 20, 2008 through 5:00 pm Friday, October 24, 2008. **I understand stipends are available to accepted applicants.**

Signature _____ Date _____