

## Advanced TB Diagnostics

*A capacity building workshop for countries in the South-East Asian Region*

**29<sup>th</sup> January 2024 – 2<sup>nd</sup> February 2024**

### Application Proforma

<b>Name in full :</b>	<b>Date of Birth/ Age :</b>
<b>Designation:</b>	<b>Field of specialization :</b>
<b>Nationality :</b>	<b>Official Address :</b>
<b>Contact Number/s :</b>	<b>Email ID:</b>

**Academic and professional details:**

Degree	Institution	Year	Remarks

Positions held	Institution	From (year)	To (year)	Remarks

**Research Experience**

**Relevant training/experience in TB diagnostics / If any:**

**Anticipated impact of Advance TB diagnostics workshop in your career (up to 150 words):**

**Signature:**

**Date:**