**Application Form**

Please complete the below form and send to **info@uzicss.uz.ac.zw** & **surgicalsim1@gmail.com**

**Eligibility**: All surgical specialities trainees and consultants

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| **Select Course** | **Principles of Laparoscopic Surgery (PLS)\*** * **Yes/No**
 |
| **Advanced Laparoscopy Course (ALC)\*\**** **Yes/No**
 |
| **Certificate in Laparoscopic Surgery (CLS)\**** **Yes/No**
 |
| **Course Date** |  |
| **Course Fee – (Includes Symposium)** | **$500 for PLS & ALC****$1200 for CLS (Please email for details)** |
| **First Name** |  |
| **Surname** |  |
| **Grade and Year** |  |
| **Hospital & Department** |  |
| **Speciality** |  |
| **Previous Experience in Laparoscopic Surgery** |  |
| **Email Address** |  |
| **Tel Number** |  |
| **Correspondence Address** |  |
| **Special Requirements** |  |
| **Payment Method**  | To be advised once application accepted |

**\* PLS -** No previous experience in laparoscopy required (Trainees and Consultants eligible)

**\*\* ALC -** Some experience in laparoscopy is required (Senior Trainees & Consultants with some experience in performing simple laparoscopic surgical procedures