

**Application for Hong Kong Society of Critical Care Medicine
Nomination to Attend CME Activities**

Name: _____ **Department:** _____

Hospital: _____ **Title:** _____

E-mail: _____

Conference/Workshop: _____

Date: _____ **Place:** _____

Please circle the appropriate score in the following table:

Category		SCORE
I.	Has not been nominated in last 2 years	30
	Has not been nominated this year	20
	Has been nominated this year	10
	Has been nominated 4 times this year	NOT ELIGIBLE
	For CME activity outside HKSAR : Has been nominated one CME activity outside HKSAR this year	NOT ELIGIBLE
	Received sponsorship from other source	NOT ELIGIBLE
II.	Relevant to the Specialty / Sub-specialty	20
III.	Chairman of organizing committee of the function	20
	Chairman of Sub-committee of the function	20
	Member of organizing committee of the function	15
IV.	Oral presentation	20
	Chairing a session in that conference	20
	Poster presentation	15
V.	Trainee	20
	Total Score	

I am a paid member of HKSCCM of the current membership period – **Yes / No** (If you not a current member, please also complete a membership application form and prepare a cheque for membership fee)

I vouch for the accuracy of the above score and understand that nomination is void in case of false score.

Signature: _____ **Date:** _____

Please **(1)** return a scanned copy of the completed form by email to secretary@hksccm.org and **(2)** mail the paper form and a crossed cheque (HK\$100 for local meeting / HK\$500 for overseas meeting) payable to **Hong Kong Society of Critical Care Medicine Limited** to

Treasurer,

Hong Kong Society of Critical Care Medicine

c/o Ward B6, Intensive Care Unit, Queen Elizabeth Hospital, 30 Gascoigne Road, Kowloon, Hong Kong