



Comprehensive Simulation Educator Course

Date : 18 & 19, 25 & 26 August 3 & 4, 10 & 11 November
Venue : Hong Kong Jockey Club Innovative Learning Centre for Medicine,
 7/F, Hong Kong Academy of Medicine Jockey Club Building,
 99 Wong Chuk Hang Road, Aberdeen, Hong Kong
Enquiries : (email) HKJCILCM@hkam.org.hk (telephone) +852 2871 8718

APPLICATION FORM

Please complete legibly all parts in **BLOCK LETTERS** and return this form together with the tuition fee to the HKJC ILCM by post or in person **1 month before the first course day. (August Batch – 18 July 2018, November Batch 3 October 2018).**

Title	: <input type="checkbox"/> Professor <input type="checkbox"/> Dr <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss		
Family Name	:	Given Name	:
Preferred Name to be called during the Course	:		
Job Title	:		
Institution/ Hospital	:		
Specialty	:		
Address	:		
Mobile No (WhatsApp)	:	Secondary Mobile No (Optional)	:
E-mail (Moodle login)	:	Secondary E-mail(Optional)	:
Are you an Academy Fellow?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Fellow No.	:
Have you ever participated in any medical simulation education course(s) as instructors or learners?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Could you briefly explain the reason(s) for joining the course?			
Could you share with us your future plans for use of simulation?			

Learning and innovation go hand in hand. The arrogance of success is to think that what you did yesterday will be sufficient for tomorrow.

IMPORTANT NOTICE

1. Full and punctual attendance is required throughout the Course.
2. The Application deadline is **1 month before the first course day**. (eg.: (August Batch – 18 July 2018, November Batch 3 October 2018) Please complete and return the Application Form together with the tuition fee to the Hong Kong Jockey Club Innovative Learning Centre for Medicine (HKJC ILCM) (7/F, Hong Kong Academy of Medicine Jockey Club Building, 99 Wong Chuk Hang Road, Aberdeen, Hong Kong) on or before the Application deadline.
3. Payment of tuition fee (HKD20,000) should be made by cross-cheque payable to “**Hong Kong Academy of Medicine**”.
4. Upon receipt of your Application Form and tuition fee, an acknowledgement email will be sent to you by the HKJC ILCM.
5. A notification email showing the application results will be sent to all applicants **3 weeks prior the first course date**. The cross-cheque submitted by unsuccessful applicants will be returned by post.
6. Application with no payment will not be processed.
7. All fees paid by successful applicants are non-refundable and non-transferrable.
8. Successful applicants are required to **study pre-course materials** including **pre-course videos/PowerPoints, and finish the MCQs** that will be posted on Moodle (the e-learning platform) **prior to the course**. A notification email and password for accessing Moodle will be sent to successful applicants around 2 weeks before the Course. The suggested preparation time will be around 1 hour. **Preparation is important as not preparing will put you fellow participants at a disadvantage.**
9. Participants are requested to communicate actively with your group members and mentor throughout the learning process by using “WhatsApp” platform. Please ensure you are able to download “WhatsApp” in your smartphone beforehand.

APPLICANT’S DECLARATION

1. I declare that the information I provide in support of this application is accurate and complete.
2. I understand that my application will not be accepted if any information or document I provided is found to be false even though payment has been made. I understand and accept that no refund will be arranged in this case.
3. I confirm that I have read and accepted the Personal Information Collection Statement attached to this Application Form.
4. I authorize the HKJC ILCM to use, check and process my data as required for my application.
5. I understand that upon application, my data will become a part of my record and may be used for all purposes in connection with the processing of the application.
6. I understand the materials developed during the Course remain property of HKJC ILCM.

Signature : _____ **Date** : _____

Personal Information Collection Statement

1. This is a statement to inform applicants of their rights under the Personal Data (Privacy) Ordinance (the Ordinance).
2. The personal data collected in this Application Form will be used by the HKJC ILCM for the purposes of organizing the Comprehensive Simulation Educator Course, and where applicable, will serve as part of an applicant’s official record with the HKJC ILCM.
3. Personal data will be kept confidential and handled by the staff of or persons appointed by the HKJC ILCM to undertake its administrative functions and for training purposes.

Note:

- a) Applicants are required to keep the HKJC ILCM informed of any changes in their personal data once they have enrolled for the Comprehensive Simulation Educator Course.
- b) Under the Ordinance, applicants may have the right to request access to, or correction of any data provided by them in relation to their application.
- c) As the Ordinance allows, the HKJC ILCM has the right to charge a reasonable fee for the processing of any request for data access. Applicants who request access to data or for the correction of their data should do so in writing to the HKJC ILCM.
- d) Applicants should write to the HKJC ILCM if they do not want to receive any information on courses, events or functions organized by the HKJC ILCM.

FOR INTERNAL USE

Course Application:	<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected
Cheque Received if Application Accepted :	<input type="checkbox"/> Received (Cheque Amount: HK\$ _____) Bank & Cheque No.: _____