



Asia-Pacific International Molecular Biology Network

MEMBERSHIP NOMINATION FORM

Photograph of the Candidate

SECTION-1

Details of the Nominee		
The candidate is nominated for election into the following memberships category		
<input type="checkbox"/> Member ¹	<input type="checkbox"/> Associate Member ²	<input type="checkbox"/> Student Associate ³

SURNAME		NAME:	
Current Nationality:		Previous Nationality:	
Date of Birth:	City and Country of Birth	Gender: Male or Female?	
Contact Address: (<i>Institution</i>):			
Phone	Fax:	Email	
Signature		Date	

NOMINEE'S BIOGRAPHICAL INFORMATION

Degrees obtained	Date obtained	Awarding Institution
BSc		
MSc		
PhD		
Profession appointments	From – to	Employing institution

Membership of academies and societies

Awards and honours

List of significant publications

¹**Members** are individual scientists who have been elected to membership according to objective criteria for scientific excellence established by the Membership Committee of the Governing Council. Members shall have the right to vote to elect Council Members on the Governing Council and to serve in such capacity.

²**Associates** are scientists who are committed to the goals and objectives of the Network, and who wish to participate in and contribute to the development of its programs and initiatives.

³**Student Associates** are students who are committed to the goals and objectives of the Network, and who wish to participate in and contribute to the development of its programs and initiatives

Please provide a brief description of current research and development interests:

REFEREES: Please provide contact details (specifically the e-mail address) of three referees, whom we can contact regarding your work:

	<i>Surname</i>	<i>Name</i>	<i>Email address</i>	<i>Postal address</i>
1.				
2.				
3.				

Certificate / Consent

I, _____ consent to my nomination as Member/ Associate Member/ Student Member of the Asia-Pacific International Molecular Biology Network A-IMBN.

Signature of the Nominee

SECTION-2

Recommendations:

We, the undersigned Members propose and second _____ for Member/ Associate Member/ Student Member of the Asia-Pacific International Molecular Biology Network A-IMBN.

Proposer

SURNAME		NAME:	
Position/Title:			
Address:		Phone:	
		Fax:	
		E-mail:	
Signature		Date	

Secunder

SURNAME		NAME:	
Position/Title:			
Address:		Phone:	
		Fax:	
		E-mail:	
Signature		Date	

Please return to:

S. RIAZUDDIN
 Executive Director A-IMBN
Attention: Ms. Hyunjung Lee
 3F, International Vaccine Institute
 San 4-8, Bongcheon 7-dong, Gwanak-gu
 Seoul 151-818, Korea
 Email: riazuddin@a-imb.org , kevin@a-imb.org, hjlee@a-imb.org