STEPS programme application form

1. Personal data: First name Family name Home address		
Gender 🗌 F 🗌 M	Date of birth	Nationality
Hospital (complete add	Po Iress)	sition held since
Postal code		lephone
Have you been involve	you worked in uro-oncolog d recently in projects or re in 2-3 lines	ical care?
Number of publications Number of posters and	s you have contributed to a l/or abstracts you have pre Please rank the following t	is a named author
		current skills and give you an experience which is relevant to your a should be relevant to your current work as well as your preferred

5. Your application must be accompanied by:

A. A current CV

- B. An up to date publication list
- C. A letter from your Head of Department endorsing your application

Please complete and return to: Atrium Communications Email: matthew.hebdon@atriumhealth.co.uk Fax: +44 (0)1245 808 267

