

Workshop Series 2018 - 19

Registration Form



INDIAN
INSTITUTE OF
PUBLIC HEALTH
DELHI

PREFIX (Prof./ Dr./Mr./Ms.)		
FIRST NAME:		
MIDDLE NAME:		
LAST NAME:		
AGE		
GENDER:	<input type="radio"/> Male <input type="radio"/> Female	
QUALIFICATIONS:	<input type="radio"/> MBBS/BDS/ AYUSH <input type="radio"/> MD/ MS/ MDS <input type="radio"/> PhD <input type="radio"/> BA/ BSc/ BCom <input type="radio"/> MA/ MSc/ MSW <input type="radio"/> Other <i>(please specify):</i> _____	
EDUCATION:	<input type="radio"/> Under graduate <input type="radio"/> Graduate <input type="radio"/> Post graduate <input type="radio"/> Doctorate	
SPECIALITY:		
NAME OF ORGANISATION:		
POSITION:		
JOB AREA:	<input type="radio"/> Medical <input type="radio"/> Nursing <input type="radio"/> Administrative/ Management <input checked="" type="radio"/> Allied Health <input type="radio"/> Social Science <input type="radio"/> Nutritionist / Dietition <input type="radio"/> Lab Science <input type="radio"/> Other <i>(please specify):</i> _____	
COUNTRY:		
NATIONALITY:		
POSTAL ADDRESS:	Address line 1	
	Address line 2	
	Address line 3	
	Address line 4	
CITY:		
DISTRICT:		
STATE:		
PROVINCE:		
POSTAL CODE:		
TELEPHONE NUMBER:		
FAX NUMBER:		
MOBILE NUMBER:		
(Prefix with Country Code)		
EMAIL:		
TYPE OF APPLICANT:	<input type="radio"/> External Participant <input type="radio"/> Student of PHFI <input type="radio"/> Research Staff at PHFI	
SPONSORSHIP:	<input type="radio"/> Self - Funded <input type="radio"/> Government <input type="radio"/> Other Sponsorship	
NAME OF SPONSORE:		
LOCALITY TYPE:	<input type="radio"/> Urban <input type="radio"/> Rural	
SOURCE OF INFORMATION ABOUT THIS WORKSHOP:	<input type="radio"/> PHFI WebSite <input type="radio"/> E- mail by IIPHD <input type="radio"/> Forwarded by my Organization <input type="radio"/> Social Media <input type="radio"/> Friends / Colleague <input type="radio"/> Others	

	TOPICS	DATE	SELECT
1.	Data Management using CSPro	Apr 9 - 12, 2018	<input type="checkbox"/>
2.	Medical Writing	May 15 - 18, 2018	<input type="checkbox"/>
3.	Economic Evaluation of Health Care Programs	May 21 - 25, 2018	<input type="checkbox"/>
4.	Design, Analysis and Interpretation of Diagnostic Test Studies	Jun 6 - 8, 2018	<input type="checkbox"/>
5.	Applied Methods of Equity Analysis in Healthcare Financing	Jul 30 - Aug 3, 2018	<input type="checkbox"/>
6.	Leadership in Health and Development Sectors	Aug 7 - 10, 2018	<input type="checkbox"/>
7.	Data Management, Analysis and Interpretation in Quantitative Health Research	Sep 11 - 14, 2018	<input type="checkbox"/>
8.	Nutritional Management of Severe Acute Malnutrition (SAM): A Capacity Building Workshop	Sep 24 - 28, 2018	<input type="checkbox"/>
9.	Statistical Analysis using Stata	Oct 8 - 12, 2018	<input type="checkbox"/>
10.	Psychological Counselling in Health Settings	Oct 9 - 12, 2018	<input type="checkbox"/>
11.	Introduction to Multivariable Analysis using Stata	Oct 22 - 26, 2018	<input type="checkbox"/>
12.	Ethics in Clinical Research	Oct 22 - 24, 2018	<input type="checkbox"/>
13.	Sample Size Estimation and Sampling Techniques	Oct 30 - Nov 2, 2018	<input type="checkbox"/>
14.	Effective Behaviour Change Communication Strategies in Public Health	Nov 19 - 22, 2018	<input type="checkbox"/>
15.	Basic Statistical Analysis using SPSS	Nov 27 - 30, 2018	<input type="checkbox"/>
16.	Advanced Data Analysis Techniques in Qualitative Research using Atlas.ti	Dec 10 - 14, 2018	<input type="checkbox"/>
17.	Project Management of Health Programs	Jan 22 - 25, 2019	<input type="checkbox"/>
18.	Operations Research in Public Health	Jan 29 - Feb 1, 2019	<input type="checkbox"/>
19.	Introduction to Economic Evaluation of Vaccines	Feb 25 - 28, 2019	<input type="checkbox"/>
20.	Approaches for Implementing Adolescent Health Programs	Feb 26 - Mar 1, 2019	<input type="checkbox"/>
21.	Design and Conduct of Observational Studies using Epi Info	Mar 4 - 8, 2019	<input type="checkbox"/>
22.	Systematic Reviews and Meta-analysis using RevMan	Mar 11 - 15, 2019	<input type="checkbox"/>
23.	Monitoring and Evaluation of Health Programs for Improved Decision Making	Mar 25 - 29, 2019	<input type="checkbox"/>

ACCOMMODATION	The organizers will be able to provide a list of hotels or guest houses near by the institute upon request.
DETAILS OF PAYMENT: (Please Tick):	<p style="text-align: right;"> <input type="radio"/> INR <input type="radio"/> USD <input type="radio"/> EURO </p> <p>Amount (in figures) _____</p> <p>Paid by:-</p> <p><input type="radio"/> Electronic Transfer: (Please attach receipt of transaction along with registration form)</p> <p><input type="radio"/> Cash deposit at Bank: (Please attach receipt of transaction along with registration form)</p> <p><input type="radio"/> Demand Draft: (please give the following details)</p> <p>Drawn in favour of: _____</p> <p>DD Number: _____ Dated: _____</p> <p>Drawn Bank: _____</p> <p><i>Please note that we do not accept direct cash payment of registration fee</i></p>

- Email the completed registration form to trainings@iiphd.org
- Demand draft can be posted to the following address:
Ms Tanuja Bhandari, Assistant Manager - Program (Trainings)
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Plot 47, Sector 44, Institutional Area
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Gurgaon – 122002, Haryana, INDIA
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