REGISTRATION REQUEST FORM

PMDA-ATC Quality Control (Herbal Medicine) Seminar 2019

Registration will close on **September 30, 2019**. Formal announcements will be made to the approved participants after the closing date.

To: Dr. Yasuhiro FUJIWARA, Chief Executive, PMDA

I hereby apply for the “PMDA-ATC Quality Control (Herbal Medicine) Seminar 2019” offered by the Asia Training Center for Pharmaceuticals and Medical Devices Regulatory Affairs (PMDA-ATC), which is held in Toyama from December 10 to 12, 2019.

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| [ ]  M[ ]  F | [ ]  Dr  | Full name \*Information here will be used for your official acceptance letter and certificateClick and fill in |
| Occupation | [ ]  Government officer [ ]  Agency staff [ ]  Others Click and fill in |
| Job title | Click and fill in |
| Organization & Department | Click and fill in (e.g. “Office of New Drug I, Pharmaceuticals and Medical Devices Agency”) |
| Office address | Click and fill inPostal code: Click and fill in | Country / RegionClick and fill in |
| Phone number | Office: Click and fill in Mobile: Click and fill in |
| Attendee e-mail address | Click and fill in (Please enter e-mail address that can be contacted in urgent situation)  |
| Name and title of head of organization | Click and fill in (e.g. “Dr. Yasuhiro Fujiwara, Chief Exective of PMDA”)\*One letter addressed to you and the head of your organization will be provided |
| Expiry date of passport | Year . Month . Day [ ]  I don’t have a passport yet (Click and fill in any notes) |
| Health condition | [ ]  Good [ ]  Others (Click and fill in) |
| Special needs and requests (e.g. prayer room) Click and fill in |
| Documents required for traveling to Japan:* Do you need PMDA to provide Visa application documents?
	+ Confirm details at: <https://www.mofa.go.jp/j_info/visit/visa/short/novisa.html>
	+ For official/diplomatic passport holders:  [https://www.mofa.go.jp/ca/fna/page22e\_000692.html](%20https%3A/www.mofa.go.jp/ca/fna/page22e_000692.html)

[ ]  YES [ ]  NO, because… [ ]  my country/region is not required Visa to enter Japan.[ ]  I will be using official/diplomatic passport.[ ]  I already have a multiple-entry Japan Visa.[ ]  of other reason: Click and fill in |
| Your expertise field[ ]  Review　　[ ]  Safety　　[ ] Inspection　　[ ]  General　　[ ]  Others | Level of expertise in your primary field[ ]  Beginner　[ ]  Intermediate [ ]  Advanced |
| Describe your current regulatory appointments as much detailed as possible.Click and fill in | Years of experience as a reviewerClick and enter number Years |
| What specific issue you want to address in your work and aspect you expect to learn from the seminar.Click and fill in |

NOTE: Certificate of participation may not be issued in case of absences from any part of the program.

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| \*PMDA would like to send announcements regarding PMDA international activities (e.g., PMDA-ATC seminars, PMDA Updates) to your email address. If you do NOT wish to receive these emails, please check the following box.[ ]  I do not wish to receive these announcements. |

I certify that the information on this registration request form is correct, and agree that the information will be disclosed to other participants and seminar related members (including but not limited to lecturers, administrative staffs, staffs at the visiting sites).

 Signature Date

I, name of the head of the organization agree with the submission of the above registration request form.

 Signature (Head of Organization) Date

 Name and title of Head of Organization (Print clearly) Date