

**To: Mr. Steven Ma**

**Fax: 3523 0752**

**To be returned on/before 7.4.2011**

***Nomination Form***

**Seminar on Infection Control Stewardship Program  
in Residential Care Homes for Elderly**

**Organized by Infectious Disease Control Training Centre, Hospital Authority/  
Infection Control Branch, Centre for Health Protection**

**18 April 2011 (Monday)**

**Lecture Theatre, G/F, Centre for Health Protection,  
147C Argyle Street, Kowloon**

I would like to nominate the following colleagues to attend above program:

<b>Priority</b>	<b>Name</b>	<b>Position</b>	<b>Telephone</b>	<b>Email Address</b>
1.				
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9.				
10.				

<b>From</b>	
Name:	Position:
Department/Hospital:	Tel no.:
Signature:	Date: