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**EAA Ultrasound Course Application form**

**EAA Ultra**

Application deadline: January 13, 2023. Every year maximum 8 fellows

The first 8 people who will send the application form will attend the course (EAA affiliated members have a priority access to the course).

This application must be completed electronically and submitted to the Secretariat Office, office@andrologyacademy.net and in c/c to

Francesco Lotti (francesco.lotti@unifi.it) and Andrea M. Isidori (andrea.isidori@uniroma1.it)

The course is held jointly by the EAA Training Centers of Florence and Rome. Decision on the applications will be taken within two weeks after the deadline.

**1. Applicant details**

|  |  |
| --- | --- |
| Name |  |
| Date of birth |  |
| Department |  |
| Postal address |  |
| Country of residence |  |
| E-mail |  |

**2. Membership**

EAA member with annual fees paid, since year

**3. Brief Curriculum Vitae an publication record**

Please:

-attach a brief CV

-attach publication record

**4. Fee information**

Academy members 700 Euros

Others………………………..1400 Euros

**5. Check list (please, tick ALL lines)**

|  |  |  |
| --- | --- | --- |
| YES | NO |  |
|  |  | I am a current member of the EAA |
|  |  | I am a fellow in training for the “Clinical Andrologist Exam”(certificate from the Center director is required) |
|  |  | I understand there is a Course Fee to be paid that will only cover the teaching material (not accommodation/travel/food) |
|  |  | I understand 25 EAA credits must be collected to obtain EAA ultrasound certification. |
|  |  | I understand it is not required to collect “consecutive” credits. |
|  |  | I understand “practical part” lasts 4 weeks, either consecutive or 4 times one week, upon agreement with the fellow and it is held in EAA Centers of Florence and Rome |
|  |  | I understand there is an initial theoretical part made of frontal lessons and videos that will be held in a single day and will host all the fellows. |
|  |  | I have attached to the present form the CV and publication record |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature |  | Date |  |