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**Vice Minister Office for Planning and Development**

**Ministry of Health**

**CPHQ Preparation Course**

**Registration Form**

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| **First Name:** | **Middle Name:** | **Last Name:** |

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**Region/ City**

**Place of work**

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**Fax No**.

**Phone No.**

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**Email Address:**

**Mobile phone:**

**Qualification** :  Bachelor  Postgraduate Diploma  Master PhD

**Specialty**:  Administrator Physician  Pharmacist  Specialist

**Current position:**

**Current Job Responsibilities:**

**Experience in Healthcare Quality**:

**English language competency:**  **Fair**  **Good**  **Excellent**

**Computer Skills:**  **Fair**  **Good**  **Excellent**

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 **Registration Closes on June 1st, 2012**