



NZ
DERMATOLOGICAL
SOCIETY
INC
The Authority On Skin

New Zealand Dermatological Society Annual Meeting International Scholarship Application Form

Last Name :

First Name :

Title/Position :

Institution employed at :

Dermatology Society or Academy :

Country:

Contact Details

Address

Telephone

Mobile

Email

Attach brief curriculum vitae, 300-word abstract of proposed presentation and signed letter of recommendation from Departmental Head or equivalent.

Email the application form and all the relevant document to administrator@nzdsi.org

