First registration

Please carefully complete this registration form and submit it to EBAC. Using your EBAC ID and password you can submit application for accreditation.

Guidelines:

- First fill in Part One below which contains mandatory questions about your organization.
- Then, go to <u>Part Two</u>, select the type of programmes you intend to submit for accreditation and fill in the corresponding parts.
- Once you are done, click on **Submit** in the Options menu on the left.

Note: you can as well use the green navigation bar on top of this page to move quickly within this form.

Important advice

It may take some time to complete this form. Note that you can save it at any time and log in back later to complete and submit.

You may also download and print an empty form, complete it off-line, and come back to fill it in on-line. See the left menu for download and save options.

Please note that all fields marked with an " * " are mandatory and should be completed.

applicable) and other relevant details:

Part One

General information		
User ID:	USERID	
Created on :	17/03/2005	
Status :	Registration form not complete	ed, cannot submit application forms
Society / Institution		
* Name of your Society / Institution :		Please indicate the scientific/ academic institution responsible for the scientific content of your programme
* Address :		
* City:		
* Code:		
Province / State :		
* Country :	<select from="" list="" the=""></select>	
* Telephone :		
* Fax :		
Web site :		
* E-mail :		
Description of your So	ociety / Institution	
* Who are you:		
☐ University/Teach ☐ Hospital ☐ Governmental Or ☐ Conference Orga	ganization nizer	ety
Other (please spe	эспу):	

* Briefly describe your organization, its structure (Committees, Task Forces, etc.) with statutes and rules of procedures (if

* Does your Organi	ization/Socie	ty organize international edu	cational e	events ? : • Yes • No
Invoice address Invoice Society / In * Name of Society				
* Address :				All same as above ? Click here.
				_
. 01				
* City:				
* Code :				
Province / State :				
* Country :		<select from="" list="" the=""></select>		
* Telephone :				
* Fax:				
* VAT number :				
Person(s) respons First person: * Title:				
* First name :	○Mr ○N	IS		
* Last name :				
* Job title :				
* Address :				Help: Address same as organization? Click here.
* City:				
* Code :				
Province / State :				
* Country :	<select fro<="" td=""><td>m the list></td><td></td><td></td></select>	m the list>		
* Telephone :			_	
* Fax :				
* E-mail 1 :				IMPORTANT : This e-mail will be used everytime we contact your society.
E-mail 2 :				,
Second person (o	ptional) :			
Title :	OMr OM	S		

Last name: Job title: Address: Line Hollp: Address same as above? Click here. City: Code: Province / Sale: Country:	First name :		
Address: Help: Address ame as above? Click hete. City: Code: Province / State: Country: Select from the list> Teleghone: Fax: E-mail 1: E-mail 2: Commercial Support Policy Do you regularly use commercial support for your educational programmes? Yes No No If yes, please indicate what kind of support it is (educational grant, advertising, etc.) I agree I don't	Last name :		
Address same as above? Click here. Code: Province / State: Country:	Job title :		
Code: Province / State: Country: Select from the list> Telephone: Fax: E-mail 1: E-mail 2: Commercial Support Policy * Do you regularly use commercial support for your educational programmes?	Address:		Address same as above ?
Province / State: Country:	City:		
Country: < Select from the list> Telephone: Fax: E-mail 1: E-mail 2: Commercial Support Policy * Do you regularly use commercial support for your educational programmes? * Yes No * If yes, please indicate what kind of support it is (educational grant, advertising, etc.) Declaration **Hereby it is declared that * Scientific Academic Ins* has the necessary skills and resources to put on an educational programme? It is within the resonability of the CME Provider to request prior authorisation from all persons whose personal data (name, address,etc) will be indicated to EBAC where completing the forms increasing by the EME Accommists as a condicional according to the French Law on Data Processing and Civil Liberties 78-17 of January 8, 1978 and keep it for for the use of EBAC staff and EBAC evaluations only. You have the right a concess, amend and oppose any use of this personal data by contacting EBAC at the below mentioned address or by e-mail to: contact @ebac-Unless to therewise informed. EBAC may send you information about its activities from time to time. Should you not wish to receive any information from EBAC, please informed. EBAC confidentiality Clause If agree with EBAC Confidentiality Clause Please select the type of programmes that you want to submit for accreditation, fill the appropriate section below and click on Submit in the Options menu on the left: Events CD-Rom Web based Go to the Events section Web based	Code :		
Telephone: Fax: E-mail 1: E-mail 2: Commercial Support Policy * Do you regularly use commercial support for your educational programmes? Yes No * If yes, please indicate what kind of support it is (educational grant, advertising, etc.) Declaration Thereby it is declared that Scientific Academic Ins has the necessary skills and resources to put on an educational programme?. I agree I don't agree Disclaimer It is within the responsibility of the CME Provide to request prior authorisation from all persons whose personal data (name, address,etc) will be indicated to EBAC when completing the forms encassary for EBAC accomditation. EBAC commits to treat all personal data a condeficial accordedination. EBAC commits to the cast plant and appose any use of this personal data by contacting EBAC at the below mentioned address or by e-mail to: contact @ observation us by e-mail act contact@ and appose any use of this personal data by contacting EBAC at the below mentioned address or by e-mail to: contact @ observation us by e-mail a contact@ and coppose any use of this personal data by contacting EBAC at the below mentioned address or by e-mail to: contact @ observation us by e-mail a contact@ observation is experiently and contact@ observation use by e-mail a contact@ observation is experiently observation. EBAC, The European HeartHouse - Route des Colles - Les Templiers - BP 179 - 05803 Sophia Antipolis Codex - France I agree with EBAC Confidentiality Clause Part Two - Programmes Please select the type of programmes that you want to submit for accreditation, fill the appropriate section below and click on Submit in the Options menu on the left: Events CD-Rom Go to the Events section Go to the CD-Roms section	Province / State :		
E-mail 1: E-mail 2: Commercial Support Policy * Do you regularly use commercial support for your educational programmes?	Country:	<select from="" list="" the=""></select>	
E-mail 1: E-mail 2: Commercial Support Policy * Do you regularly use commercial support for your educational programmes?	Telephone :		
Commercial Support Policy * Do you regularly use commercial support for your educational programmes?	Fax :		
* Do you regularly use commercial support for your educational programmes?	E-mail 1 :		
Do you regularly use commercial support for your educational programmes? Yes No If yes, please indicate what kind of support it is (educational grant, advertising, etc.) Declaration "Hereby it is declared that Scientific Academic Ins has the necessary skills and resources to put on an educational programme". I agree I don't agree Disclaimer It is within the responsibility of the CME Provider to request prior authorisation from all persons whose personal data (name, address,etc) will be indicated to EBAC when completing the forms necessary for EBAC accreditation. EBAC commits to treat all personal data as confidential according to the French Law on Data Processing and Civil Liberties 78-17 of January 6, 1978 and keep it for for the use of EBAC staff and EBAC evaluators only. You have the right to access, amond and oppose any use of this personal data by contacting EBAC at the below mentioned address or by e-mail to: contact@ebac-crac.crac.givenewise informed, EBAC may send you information about its activities from time to time. Should you not wish to receive any information from EBAC, please inform us by e-mail at contact@ebac-crac.givenewise informed, EBAC access and you information about its activities from time to time. Should you not wish to receive any information from EBAC, please inform us by e-mail at contact@ebac-crac.givenewise informed. EBAC confidentiality Clause I agree with EBAC Confidentiality Clause I disagree with the EBAC Confidentiality Clause Part Two - Programmes Please select the type of programmes that you want to submit for accreditation, fill the appropriate section below and click on Submit in the Options menu on the left: Events CD-Rom Go to the Events section Go to the CD-Roms section	E-mail 2 :		
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Please select the type of programmes that you want to submit for accreditation, fill the appropriate section below and click on Submit in the Options menu on the left: Events CD-Rom Go to the Events section Go to the CD-Roms section	It is within the responsibility when completing the for EBAC commits to treat a for the use of EBAC staff You have the right to accome.org. Unless otherwise information inform us by e-mail at complete EBAC, The European Head I agree with EBAC	ns necessary for EBAC accreditation. Il personal data as confidential according to the and EBAC evaluators only. eess, amend and oppose any use of this personated, EBAC may send you information about its acceptated and expressions. eartHouse - Route des Colles - Les Templiers - EBAC Confidentiality Clause	French Law on Data Processing and Civil Liberties 78-17 of January 6, 1978 and keep it for all data by contacting EBAC at the below mentioned address or by e-mail to: contact@ebac-tivities from time to time. Should you not wish to receive any information from EBAC, please
Please select the type of programmes that you want to submit for accreditation, fill the appropriate section below and click on Submit in the Options menu on the left: Events CD-Rom Go to the Events section Go to the CD-Roms section	Dort Two D-	oarammaa	
■ Events ■ CD-Rom Go to the Events section ■ Web based Go to the CD-Roms section	Please select the	type of programmes that you want to	submit for accreditation, fill the appropriate section below and click
CD-Rom Go to the Events section Web based Go to the CD-Roms section	_	opasio mona on mo iora	
	CD-Rom	Go to the CD-Roms section	

•			
Cardiology events you have orga	anized (if	applicable)	
Check this to be able to submit Eve	nts (ex: o	congress - workshop	- lecture - etc.)
Have you organized any CME events in	ı cardiolo	gy already ? 🔲 Yes 🤇	No If not, please go there.
Please enter data about the two most rec	ent event	s in cardiology you hav	ve organized :
Event 1 Title :			
City:			
Country: <select from="" list="" the=""></select>			
Dates : From 01 Jan 2005			
To 01 Jan 2005 70 Jan 2005			
50.1			
Number of Faculty Members :			
Number of participants :			
Countries the participants came from :			Please add countries here
<select from="" list="" the=""> Albania</select>		Assign >>	
Algeria American Samoa		<< Remove	
7.11.01.041.1 041.1104			
Event 2 (optional) :		I	
Title:			
City:			
Country: <select from="" list="" the=""></select>			
Dates: From 01 Jan 2005			
To 01 Jan 2005			
Number of Faculty Members :			
Number of participants :			
Countries the participants came from :			Please add countries here
<select from="" list="" the=""> Albania</select>		Assign >>	i iease auu countiles Hele
Algeria American Samoa		<< Remove	
AIIICIICAII SAIIIUA			

No event organized yet

In case you have not previously organized any cardiology meeting, please give a short description of your relevant experience in the field :

Cardiology CD-Roms you have produced (if applicable)	
Check this to be able to submit CD-Roms for accreditation	1
* Have you already produced medical educational CD-Roms ? If yes, which medical speciality did they concern?	Yes No If not, please go there.
Please provide information about the two most recent CD-Roms y of cardiology): CD-Rom 1 :	ou produced (if possible, describe the CD-Roms in the field
Title:	
Content (description):	
Multimedia technology used :	<u> </u>
Languages :	
Name and address of the company that produced the CD-Rom	:
Website:	
Number of copies produced : Price of one copy :	
CD-Rom 2 : Title :	
Content (description):	
Multimedia technology used :	<u> </u>
Languages :	

name and address of the company that produced the CD-Rom:	
Website:	
Number of copies produced :	
Price of one copy :	
No CD-Roms produced yet	
In case you have not previously produced any medical educational experience in the field :	CD-Roms, please give a short description of your
Cardiology web based contents you have produced (if app	licable)
Check this to be able to submit Web based contents for accre	editation
* Have you already produced medical educational web based content of the second of the	nts ? Yes No If not, please go there.
Please provide information about the two most recent web based cor in the field of cardiology): Web module 1:	ntents you produced (if possible, describe the module
Title:	
Content (description) :	
Multimedia technology used :	Glossary
Languages :	
Name and address of the company that produced the module :	
Website:	
Web module 2 :	

Title:	
Content (description):	
Multimedia technology used :	Glossary
Languages :	
Name and address of the company that produced the module :	
Website:	
No web based contents produced yet	
In case you have not previously produced any medical education your experience in the field:	al web based contents, please give a short description of
Cardiology articles you have published (if applicable)	
Check this to be able to submit Articles for accreditation (p	published in a scientific journal)
Have you already published medical educational CME articles?	◯ Yes ◯ No If not, please go <u>there</u> .
If yes, which medical speciality did they concern?	
Please provide information about the two most recent Article/text of cardiology):	you produced (if possible, describe the modules in the field
CME article 1 :	
Title:	
Content (description):	
Name of the Journal :	
Languages :	
Name and address of the company that published the article:	

CME article 2:	
Title:	-
Content (description):	
Name of the Journal :	
Languages :	_
Name and address of the company that published the article :	
No CME articles published yet	

In case you have not previously published any medical educational **CME articles**, please give a short description of your experience in the field :