**First name: ……………………………………………………….**

**Surname: …………………………………………………………**

Date of birth: **|\_\_\_|\_\_\_| / |\_\_\_|\_\_\_| / |\_\_\_|\_\_\_|\_\_\_|\_\_\_|**

Working country**: ………………………………………………..**

Position: In training  YES  NO In research  YES  NO

***WORKING AND RESEARCH EXPERIENCES***

Specialisation:  Medical Oncology  Head and neck surgery

  Radiotherapy  Pathology  Radiology  Biology

 Biotechnology  Statistic

  Other: ……………….

Working place:  University Hospital  General Hospital  Cancer center

Main fields of interest regarding head and neck cancers:**……………………...**

**…………………………………………………………..................................................................**Head and neck cancer skills: **…………......................................................**

**…………………………………………………………..................................................................**

Clinical trials experience:  YES  NO

 If Yes:  Phase I  Phase II  Phase III

 As:  Principal Investigator  Sub-Investigator

Did you ever attend at the Flims Clinical Research Workshop:  YES  NO

Member of a scientific society:  YES  NO

If Yes:  ASCO  ESMO  IASLC  AACR  Other (specify):**………………………**

***EORTC HNCG- Young Investigators mission***

Your strong points**: …………………………………………………………………………………**

Your weak points**: …………………………………………………………………………………..**

What time could you invest for the YI group**: ……………………………………………………..**

Best days and time for TC**: …...……………………………………………………………………..**

Can you recommend anyone else for the YI group (No more than 1 person)**: ………………………………………………………………………………………………………….**

***PERSONAL INFORMATION***

Define yourself with one world or adjective**:……………………………………….....................**

Your hobbies**: …...……………………………………………………………………….................**

Your favourite holiday**:………………………………………………………………......................**

One thing you most like about yourself (medical and professional ARE NOR PERMITTED!):

**…………………………………………………………………………………………………………**