

REGISTRATION FORM (CenMED Faculty Development Program 2015)

Full Name (Prof / A/Prof / Dr / Mr / Mrs / Ms / Mdm *) Please <u>underline</u> your family name	
MCR no. / DBR no. / PRN / Nurse Registration no. *	
Designation	
Institution / Faculty / Department	
Address	
Contact no.	Fax no.
Email Address	

* Please circle where applicable

Registration Fees (Fees are inclusive of GST)			
Workshop Code	Workshop Title	NUHS Staff (including staff on YLLSoM Adjunct / CFS Scheme)	Others
B	<u>24th March 2015, (8.30am – 5.30pm)</u> Teaching & Learning Strategies for the Healthcare Professional Education (previously titled as 21 st Century Teaching – Learning Strategies)	<input type="checkbox"/> S\$160	<input type="checkbox"/> S\$180
C	<u>25th & 26th March 2015, (8.30am – 5.30pm)</u> Effective Course Design for Health Professional Education (previously titled as Curriculum Design, Evaluation and Continuous Quality Improvement)	<input type="checkbox"/> S\$192	<input type="checkbox"/> S\$210
F	<u>27th April 2015, (8.30am – 12.30pm)</u> Interactive Teaching – Learning : Large Group	<input type="checkbox"/> S\$128	<input type="checkbox"/> S\$150
G	<u>27th April 2015, (1.30pm – 5.30pm)</u> Flipped Classroom	<input type="checkbox"/> S\$128	<input type="checkbox"/> S\$150
H	<u>28th & 29th April 2015, (8.30am – 5.30pm)</u> Interactive Teaching – Learning : Small Group	<input type="checkbox"/> S\$192	<input type="checkbox"/> S\$210
I	<u>4th May 2015, (8.30am – 5.30pm)</u> Qualitative Research Methods in Health Professions Education: Introductory	<input type="checkbox"/> S\$160	<input type="checkbox"/> S\$180
J	<u>5th May 2015, (8.30am – 5.30pm)</u> Competency Based Medical / Health Professional Education: Providing Effective Feedback to Enhance Learning	<input type="checkbox"/> S\$160	<input type="checkbox"/> S\$180

(More workshops on the next page)

Registration Fees <i>(Fees are inclusive of GST)</i>			
Workshop Code	Workshop Title	NUHS Staff (including staff on YLLSoM Adjunct / CFS Scheme)	Others
K	<u>6th May 2015, (8.30am – 5.30pm)</u> Scholarship of Teaching and Learning (SoTL)	<input type="checkbox"/> S\$160	<input type="checkbox"/> S\$180
L	<u>12th May 2015, (8.30am – 5.30pm)</u> Use of Videos in Medical Education	<input type="checkbox"/> S\$160	<input type="checkbox"/> S\$180
A	<u>19th May 2015, (8.30am – 5.30pm)</u> **Revised Date Learning Outcomes and Entrustable Professional Activities (EPA)	<input type="checkbox"/> S\$160	<input type="checkbox"/> S\$180
M	<u>25th & 26th May 2015, (8.30am – 5.30pm)</u> Competency Based Medical / Health Professional Education: Written Assessment	<input type="checkbox"/> S\$192	<input type="checkbox"/> S\$210
N	<u>29th May 2015, (1.30pm – 5.30pm)</u> Competency Based Medical / Health Professional Education: Mini-CEX	<input type="checkbox"/> S\$128	<input type="checkbox"/> S\$150
O	<u>25th June 2015, (8.30am – 12.30pm)</u> *NEW Quality Assurance & Accreditation	<input type="checkbox"/> S\$128	<input type="checkbox"/> S\$150
P	<u>13th & 14th July 2015, (8.30am – 5.30pm)</u> Assessment of Practical / Clinical Skills: Workplaced Based Assessment	<input type="checkbox"/> S\$192	<input type="checkbox"/> S\$210
Q	<u>15th July 2015, (8.30pm – 5.30pm)</u> Assessment of Practical / Clinical Skills: Multi – Station Examinations	<input type="checkbox"/> S\$160	<input type="checkbox"/> S\$180
R	<u>24th July 2015, (8.30am – 12.30pm)</u> Technology – Enhanced Learning: Introductory (previously titled as E-Learning)	<input type="checkbox"/> S\$128	<input type="checkbox"/> S\$150
S	<u>24th July 2015, (1.30pm – 5.30pm)</u> Technology – Enhanced Learning: Intermediate (previously titled as E-Learning)	<input type="checkbox"/> S\$128	<input type="checkbox"/> S\$150
T	<u>30th July 2015, (8.30am – 5.30pm)</u> Qualitative Research Methods in Health Professions Education: Intermediate	<input type="checkbox"/> S\$160	<input type="checkbox"/> S\$180

More details on CenMED Faculty Development Program at <http://medicine.nus.edu.sg/CenMED/>

Registration Fees <i>(Fees are inclusive of GST)</i>			
Workshop Code	Workshop Title	NUHS Staff (including staff on YLLSoM Adjunct / CFS Scheme)	Others
D	<u>15th October 2015, (8.30am – 12.30pm)</u> **Cancelled Competency Based Medical / Health Professional Education: Portfolio for Learning & Assessment	<input type="checkbox"/> S\$128	<input type="checkbox"/> S\$150
E	<u>15th October 2015, (1.30pm – 5.30pm)</u> **Cancelled Competency Based Medical / Health Professional Education: Developing Context Rich MCQ	<input type="checkbox"/> S\$128	<input type="checkbox"/> S\$150

Payment Methods:

Payment Option 1: Cheque / Draft

Please make your cheque / draft payable to "National University of Singapore". On the reverse side, please write the workshop title and participants' name(s) and mail to the address listed below.

Payment Option 2: Credit Card

Please fill attached form on page 3 and mail/fax/email the form to the address listed below.

Payment Option 3: Invoice

Invoice to attn to: _____

Email: _____

Tel: _____

Billing Address: _____

Mailing Address: _____

Please send completed registration form / cheque / draft to:

Jasmine Ho / Beatrice Li / Lee Ai Lian / Emily Loo
Centre for Medical Education (CenMED), Dean's Office, Yong Loo Lin School of Medicine,
NUHS Tower Block, Level 11, 1E Kent Ridge Road
Singapore 119228
DID: (65) 6516 2332 / (65) 6516 1522 / (65) 6516 8123 / (65) 6516 1048 Fax: (65) 6872 1454
Email: CenMED@nuhs.edu.sg

Cancellation Clause

Any cancellation or replacement must be conveyed in writing to the organiser.
Cancellation received 60 days before the workshop: Full refund (*less off bank charge*).
Cancellation received between 30 – 59 days before the workshop: Refund of 50% of the workshop fee.
Cancellation received 1 – 29 days before the workshop: No refund. **Please refer to the workshop fliers for the exact cut off dates with regards to the cancellation policy for the respective workshops.*
Registration can be only confirmed upon full payment. CenMED reserves the rights to change the date / timing / location etc.

By submitting the form, I hereby fully consent to

- National University of Singapore collecting, using and/or disclosing my personal data in any form and to disclose the same to third parties (including any third party located outside of Singapore) in compliance with the Singapore PDPA 2012 and all subsidiary legislation for the purpose of processing my application, administering my payment and subsequent registration to the CenMED workshops and all other actions necessary in relation to the registered workshops.
- Having my photographs and videos taken during the event for the purpose of marketing, publicity, and media/social media. I further consent to NUS disclosing such photographs and videos to third party media entities (whether in Singapore or otherwise) for publicity purposes and NUS may identify me by name.

Please tick the box below if you wish to receive updates on our future events and updates:

[] Yes, add me to your mailing list.

**** THANK YOU FOR YOUR PARTICIPATION ****

CREDIT CARD PAYMENT FORM
(CenMED Faculty Development Program 2015)

Salutation :

Dr Prof A/Prof Mr Mdm Ms (please "√" to indicate)

Family Name:

Given Name:

Workshop Code: (please "√" to indicate)

<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> C	<input type="checkbox"/> D	<input type="checkbox"/> E	<input type="checkbox"/> F
<input type="checkbox"/> G	<input type="checkbox"/> H	<input type="checkbox"/> I	<input type="checkbox"/> J	<input type="checkbox"/> K	<input type="checkbox"/> L
<input type="checkbox"/> M	<input type="checkbox"/> N	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> Q	<input type="checkbox"/> R
<input type="checkbox"/> S	<input type="checkbox"/> T				

Total Amount:

Credit Card Type:

Visa Mastercard (please "√" to indicate)

Cardholder Name:

(as shown in credit card)

Card Number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Card Expiry Date:

Signature:

Please fax or send your credit card details to:

Centre for Medical Education (CenMED), Dean's Office, Yong Loo Lin School of Medicine,
NUHS Tower Block, Level 11

1E Kent Ridge Road, Singapore 119228

Attn: Ms Jasmine Ho / Beatrice Li / Ms Lee Ai Lian / Ms Emily Loo

Tel: (65) 6516 2332 / 1522 / 8123 / 1048 Fax: (65) 6872 1454 Email: CenMED@nuhs.edu.sg