



# International Federation of Biomedical Laboratory Science Scientific Network of Experts (SNE)

# Replace with First name(s) SURNAME(s)

By supplying this information, you agree that this is kept by IFBLS for this purpose only

[All blue text should be replaced. All CV headings are optional. Remove any empty headings. Limit to 5 pages]

- Replace with house/apt. number, street name, city, postcode, country
- Replace with telephone number 🔋 Replace with mobile phone number
- Replace with e-mail address
- Replace with personal website(s)/blog (if any)

Replace with photo<sup>1</sup>

Gender: F / M | Date of birth<sup>1</sup> dd/mm/YYYY | Nationality: Add Country

MOTIVATION TO REGISTER IN IFBLS SCIENTIFIC NETWORK OF EXPERTS

Replace with personal statement

PROFESSIONAL EXPERIENCE

[Add separate entries for a maximum of the five most recent experiences. Most recent first.]

Replace with dates (from - to)

Replace with occupation or position held

Replace with employer's name and locality (if relevant, full address and website)

• Replace with main activities and responsibilities

**EDUCATION AND TRAINING** 

[Add separate entries for relevant programs/degrees/courses. Start from the most recent.]
Replace with qualification awarded

Replace with dates (from - to)

Replace with education or training organisation's name and locality (if relevant, country)

• Replace with a list of principal subjects covered or skills acquired

## FIELDS OF EXPERTISE

[Keep only your relevant areas of expertise, please limit the number to 1 - 2]

Blood Transfusion Sciences

Laboratory and Patient Safety

Clinical Biochemistry

Laboratory Management

Laboratory Ouslity Assurance

Clinical Cytology Laboratory Quality Assurance/Laboratory Clinical Haematology Information Management Systems

Clinical Histopathology
Clinical Microbiology and Virology
Clinical Pharmacology
Clinical Physiology
Clinical Physiology
Clinical Physiology
Clinical Physiology
Pre-Analytics
Education
Professional Ethics

Histocompatibility and Immunogenetics Research Immunology and Serology Others, specify

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<sup>&</sup>lt;sup>1</sup> Optional



## Curriculum Vitae

First name(s) SURNAME(s)

#### ADDITIONAL INFORMATION

[Limit to last five - 5 - years if necessary]

Publications
Honours and Awards
References
Certifications
Volunteer work in relevant

societies

Replace with relevant publications, presentations, projects, conferences, seminars, honours and awards, memberships, references.

Remove headings not relevant in the left column.

#### Example of publication:

• Edwards, S. T., Dorr, D. A. & Landon, B. E. (2017). Can Personalized Care Planning Improve Primary Care? *JAMA*, 318(1), 25-26.

#### Example of project:

 Devon new public library. Principal architect in charge of design, production, bidding and construction supervision (2008-2012).

### VALIDATION Membership in IFBLS Association Member

 Replace with name of IFBLS Association Member. A letter of support from the association needs to be attached to the application.

Supported and validated

Will be added by IFBLS office

#### TERMS AND CONDITIONS

Members accepted into the Scientific Network represent only themselves in any task connected to the IFBLS Scientific Network at any given time.

By submitting this CV to the IFBLS office, IFBLS has the right to:

- Contact your Association Member to validate your membership
- Publish your name, affiliation and field(s) of expertise on the IFBLS webpage for the Scientific Network of Experts
- IFBLS may at any point ask you to provide copies of credentials, for instance but not limited to:
  - copies of degrees and qualifications;
  - o testimonial of employment or work placement;
  - o publications or research.

To be submitted to the IFBLS office at: <a href="mailto:communications@ifbls.org">communications@ifbls.org</a>

Please indicate in email subject line "IFBLS Scientific Network of Experts"