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| **Curriculum Vitae**  |
| **Personal Details** |
| Name: |  |
| Job Title: |  |
| Address *(full work address)*: |  |
| Telephone:  |
| Professional registration, if applicable *(include name of body and registration number)* |
| **Academic Qualifications (most current first)** |
| Degree/Certification | Date (yyyy) | Institute, Country |
|  |  |  |
| **Previous appointments (include last 3 appointments):** |
| Position | Start and end dates  | Institute or company |
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| **Brief Summary of relevant clinical research experience**  |
|  |
| **Brief Summary of relevant clinical research training *(include any relevant training in the conduct of research eg: Good clinical practice; Informed Consent etc***  |
| Training | Dates  | Provider |
|  |  |  |
| Signature: | Date:  |