

# © **Definitive Surgical Trauma Care Course (DSTC™)**

**2011**

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IATSIC

International Association for Trauma Surgery and Intensive Care

An Integrated Society of  
The International Society of Surgery (ISS)

Secretariat:

DSTC™ Secretariat

ISS/SIC

c/o Allveco AG

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CH-4419 Lupsingen

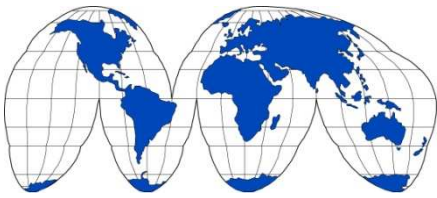
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# iatsic

International Association for Trauma Surgery and Intensive Care

## Definitive Surgical Trauma Care™ Course

### Course Candidate Application Form

(Please type or print using black ink)

Application Date		Application sent by:	emai		Fax		Post	
Surname			Title					
First name			Calling name for name badge					
Business Address								
Postal Address								
Residential Address								
Telephone: Home			Telephone: Business					
Fax Number: Home			Fax Number: Business					
Cell Phone:			Email:					
Medical Registration No.			Nursing Registration No.					
I.D. or Passport No.			Nationality					
Special Diet Request								
Qualifications			University degree and Date					
Highest Surgical Examination			Date passed					
ATLS® successfully completed			Date					
Summary of experience over last three years								
Internship performed at								
Current appointment								
Reasons for DSTC™ Application								
Office Use only								
Date Received	Date acknowledged	Payment received		Course allocated				