

## Application for membership at CIH<sup>LMU</sup> Center for International Health

The membership contract between you and the CIH<sup>LMU</sup> comes into effect once the application for membership form has been completed and accepted by a duly authorized officer of the CIH<sup>LMU</sup> and the Membership Agreement has been signed by you and by the CIH<sup>LMU</sup> Board.

Existing involvement(s) in **CIH activities**?

Yes

If yes, which?

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

No

### Personal Information

Complete Name \_\_\_\_\_

Date of Birth (dd/mm/year) \_\_\_\_\_

Gender \_\_\_\_\_

Title/ Profession \_\_\_\_\_

Institute/ Company \_\_\_\_\_

Department/ Division \_\_\_\_\_

Academic degrees \_\_\_\_\_

*Indicate highest degree earned, and institution granting the degree.*

## Contact Information

### Institute/ Company Address

Street Address \_\_\_\_\_ Number/ Room \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_  
ZIP/ Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
Telephone \_\_\_\_\_ Mobile phone \_\_\_\_\_  
(incl. area code)

### Your E-mail Address

\_\_\_\_\_ (institutional and/or private)

### Focus Areas of CIH<sup>LMU</sup>, in which you are active:

- International Occupational Safety and Health
- Medical Education
- Infectious Diseases and Tropical Medicine
- Humanitarian Aid
- Padiatrics
- Global Mental Health
- Environmental Health
- One Health
- Others: \_\_\_\_\_

### Collaboration with other institutions

Please indicate with a cross your active collaboration (if any) with CIH partner institutions.

List of CIH partner institutions:

- Jimma University (JU), Ethiopia
- National Institute of Medical Research – Mbeya Medical Research Center (MMRC), Tanzania
- Universidade Católica de Beira (UCM), Mozambique
- University of Cape Coast (UCC), Ghana
- Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB), Bhutan
- Patan Academy of Health Sciences (PAHS), Nepal
- Universidad del Rosario (UR), Colombia
- Universidade Federal do Paraná (UFPR), Brazil
- Universidad Mayor, Real y Pontificia de San Francisco Xavier de Chuquisaca (USFX), Bolivia
- Universidad de San Carlos de Guatemala (USAC), Guatemala

Please indicate the most important three collaborations with other institutions with potential relevance for the work of CIH (if any):

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The aim of CIH<sup>LMU</sup> and its partners is to improve the health conditions in low and middle income countries by promoting medical education and research.

I hereby apply for membership in the CIH<sup>LMU</sup> Center for International Health. I have read and understood the CIH<sup>LMU</sup> Membership Agreement.

For the purpose of processing my application and for the members' administration, I agree on the storage of my data.

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**Print Name**

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**Place, Date**

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**Signature**

Please submit your membership application by post or e-mail to:

LMU Klinikum  
CIH<sup>LMU</sup> Office (Room 3D.62)  
Ziemssenstr. 1  
80336 Munich, Germany  
E-Mail: [cih@lrz.uni-muenchen.de](mailto:cih@lrz.uni-muenchen.de)