

To Organizing Committee of the World Ophthalmology Congress 2008
(WOC 2008)

From Supervisor's printed name: _____
Title: _____
Institution: _____
Tel.: _____
Email: _____

To whom it may concern

Re: Trainee Declaration

This is to certify that _____ (Trainee Name) with registration
barcode number _____ enters ophthalmological training on or
after Jan 1, 2002, and has "full-time trainee" status at the time of WOC 2008.

Best Regards,

(Signature)

Date: _____

Remarks:

1. *Trainee declaration must be submitted by Email (cert@woc2008hongkong.org) or fax (852-2715 9490) after the online registration. All rights reserved.*