**Expression of Interest Form**

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| **Applicant Details** |
| Full name |  |
| MIN |  |
| Faculty/Chapter/Division  |  |
| Gender | *[ ]* Male*[ ]* Female*[ ]* Self-described (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*[ ]* Prefer not to say |
| Address |  |
| Phone (mobile/home) |  |
| Email |  |

Please briefly state how your knowledge, qualifications, skill, experience, and interest are relevant to this opportunity.

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| Proposed topic area (please select) | *[ ]* A topic related to big data analyses in medicine, and/or*[ ]*  A topic related to big data analyses in a specific specialty of internal medicine, and/or*[ ]* A topic related to medical education, ethics, or humanity, and/or *[ ]* Other (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Proposed session title |  |
| Proposed session overview (250-300 words) |  |
| I confirm I am available to present a lecture in person in Hong Kong on 11-12 October 2025. | *[ ]* Yes*[ ]* No |

By submitting my EOI, I acknowledge that my contact details will be shared with other members of the Adult Medicine Division Council and College staff working with the Adult Medicine Division Council.

**Declaration of Eligibility**

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ hereby confirm that all information provided in support of my expression of interest is complete and accurate and is not misleading in any way.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please attach a copy of your academic Curriculum Vitae**

Form to be emailed to adult.med@racp.edu.au with a copy of your academic CV