|  |  |  |
| --- | --- | --- |
| **Name:** | | **Age:** 20-30 30-40 40-50  50-60 60-70 70+ |
| **Present affiliations:** | | | |
| **Address****for communication:** | | | |
| **Previous affiliations/ Past experience, if any**: | | | |
| **Educational Qualifications:** | | | |
| **Contact Number:** | **Email ID:** | | |
| **Please identify your role:**  Medical practitioner Health researcher Social Scientist NGO  Legal expert Ethicist Administrative Media  Patient Representative Public/ Community Representative Any Other (*Specify***) …………………………….** | | | |
| **Are you a member of an ethics committee:** Yes No | | | |
| **Relevant training/experience in the area of ethics If any:** | | | |
| **Achievements/Awards/Recognitions in ethics, If, any:** | | | |
| **Medical experts**  **Total number of publications (Past 10 years.):**  **Top 3 publications (in last 5 years):**  **H index (5 years):** | | | |
| **Non-medical experts**  **Publications/ Blogs/Books/ Print Media, if any:**  **Public involvement/ Social Work/ Public service activities, if any**  Community-based work **☐**  social media/print media presence **☐**  Other relevant Qualities **☐**  **Provide Details:** | | | |
| **Areas of interest to contribute:** | | | |
| **Date:** Enter date | | | |