



ESGE SIG Document of Support

Mandatory form to apply to become a SIG Member

Your SIG member application should be supported by three current ESGE members. Please complete the list underneath in order to allow the ESGE Central Office to contact your supporters by e-mail. Upload this completed file in the SIG member application form on the ESGE website, together with your motivation letter and CV.

Supporter 1

First Name:

Last Name:

E-mail:

Country:

ESGE or Corporate Society member (AGE, BSGE, SEGI, SCGP)

Supporter 2

First Name:

Last Name:

E-mail:

Country:

ESGE or Corporate Society member (AGE, BSGE, SEGI, SCGP)

Supporter 3

First Name:

Last Name:

E-mail:

Country:

ESGE or Corporate Society member (AGE, BSGE, SEGI, SCGP)

Undersigned, _____ (Last name, First Name), current member of The European Society for Gynaecological Endoscopy, hereby officially confirm my SIG Member application to the ESGE, and confirm my three supporters are current ESGE Members.

Signature:

Place, date: