



## AUSTRALASIAN ACADEMY OF FACIAL PLASTIC SURGERY

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### APPLICATION FOR AAFPS FELLOWSHIP/OBSERVERSHIP

*Please use a separate sheet to expand if required*

**Name** .....

**Address** .....

**Phone** .....

**Email** .....

**Current position** .....

**Speciality** ..... **Years in training** .....

**Papers published** .....

**Research projects** .....

*Please remember to include your curriculum vitae*