

CHART TRAINER REGISTRATION FORM

Please check all Training Topics in which you are competent as a trainer. Check all that apply.

- | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Adult learning
<input type="checkbox"/> ART
<input type="checkbox"/> Blood safety
<input type="checkbox"/> Community outreach
<input type="checkbox"/> Counseling/communication
<input type="checkbox"/> HIV Voluntary Counseling and Testing (VCT)
<input type="checkbox"/> Injection safety
<input type="checkbox"/> Laboratory
<input type="checkbox"/> Mass media
<input type="checkbox"/> Nutrition
<input type="checkbox"/> Opportunistic infections | <input type="checkbox"/> Palliative care
<input type="checkbox"/> Pharmacology
<input type="checkbox"/> PMTCT
<input type="checkbox"/> PMTCT Plus
<input type="checkbox"/> Policy system strengthening
<input type="checkbox"/> Prevention
<input type="checkbox"/> STI
<input type="checkbox"/> Strategic information
<input type="checkbox"/> TB
<input type="checkbox"/> Universal precautions and infection control |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Please list all languages spoken fluently:
