



Application to attend NICD training courses: 2026

This form must be filled in electronically and submitted by all applicants, regardless of university/institute affiliation. When applicable, note that both the immediate registrar supervisor and the HOD of the university department to which you belong need to sign approval (below). This is to ensure properly-authorised attendance.

Programme requested (see schedule):

- NICD comprehensive infectious disease rotation (3-week core + Intensive Mycology and Parasitology) [] 5 -30th October 2026

OR

- NICD 3-week core rotation [] 5 - 23rd October 2026

Table with 2 columns: Complete following questions, Responses are required for all questions. Rows include: Name & Surname, Email, Cell phone no, Year of medical qualification, University where obtained, Year of starting current specialty, HPCSA Registration number, University of current registration, Discipline in which you are currently specialising, Year of study in the discipline indicated above, Primary/first part MMed exam completed, When do you plan to write the final exam in your specialty?

Immediate Supervisor: Approved (signature)

(Name & Surname)

Date:

Head of Department: (HOD signature) Approved

(HOD Name & Surname)

Date:

Enquiries: Dr Keeren Lutchminarain | Tel 011 386 6477 | Email: keerenl@nicd.ac.za

E mail applications to: mzikazid@nicd.ac.za

Closing dates for applications: 05 September 2026 or when maximum capacity has been reached



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