EUROPEAN ACADEMY OF ANDROLOGY
EAA EDUCATIONAL COURSES

Application form

To be submitted to the Educational Committee (eajannini@gmail.com and kopaandro@gmail.com) before the 1st of May of each year.

CENTER.................................................................................................................................

NAME OF PROPONENT...........................................................................................................

TITLE, DATE AND SITE OF THE COURSE..............................................................................................

COURSE TYPE:

□ ‘full’

□ “short”

□ Podcast Course

MACROAREA:

□ Fertility and infertility

□ Genetics, epigenetics and embryology in Andrology

□ Hypogonadism and other endocrine and metabolic diseases of andrological interest

□ Andrological cancers

□ Urological problems in Andrology

□ STD

□ Sexual Medicine

□ Research methods, diagnostic tools, therapeutic protocols of selected andrological pathologies

TOPICS..............................................................................................................................................

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WHICH PART(S) OF EAA-ESAU CURRICULUM IS COVERED BY THE COURSE?

TEACHING METHODS (Please describe)

PRE-EXAMINATION

☐ YES

☐ NO

FINAL EXAMINATION

☐ YES

☐ NO

SYLLABUS

☐ YES

☐ NO

CLINICAL CASES

☐ YES

☐ NO

NUMBER OF REQUESTED EAA CREDITS

IS THE EAA FINANCIAL SUPPORT REQUESTED?

☐ YES

☐ NO

FEE

In-training students...........

Academy members.............

Others...................

LANGUAGE:
☐ English

☐ Local with simultaneous translation

☐ Local with slides and educational material in English

**DID THE CENTER ORGANIZE OTHER EAA EDUCATIONAL COURSES IN THE PAST?**

☐ Yes, When? ........ With EAA financial support? ☐ Yes, ☐ No,

☐ Never

*The proposal must be accompanied by a detailed program*