



# EUROPEAN DIPLOMA IN MUSCULOSKELETAL RADIOLOGY APPLICATION FORM

Please send your application together with all necessary documents (see eligibility criteria) via postal mail or via email (office@essr.org) to the ESSR Office.

## PERSONAL INFORMATION

Gender  male  female

Academic title

First name

Last name

Date of birth (DD | MM | YYYY)

## CONTACT INFORMATION

Hospital

Department

Head of department

Street

ZIP

City

Country

Phone

Fax

Email

Retype email



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## APPLICATION FORM

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### PAYMENT

**Payment method:** credit card payment only  
**Handling fee:** € 400.00

After approval you will receive an autorisation form to indicate your credit card details.

### GENERAL TERMS AND CONDITIONS

#### Accuracy of information

I herewith confirm the accuracy of the information provided.

#### Appeal procedure

I herewith understand that no appeal may be made in relation to the content of the examination.

#### Terms of cancellation

No refunds can be provided if an applicant withdraws his/her application.  
If a candidate cannot provide all entry criteria, his/her registration for the examination will be cancelled.  
Candidates judged to have satisfied the entry criteria will be eligible to take the diploma examination.

I herewith accept the terms of cancellation as indicated above.

**Please note that no refunds can be provided if an applicant withdraws his/her application.**

<b>Date</b>	<b>Signature</b>
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### Check List:

- Certificate of completed training (Members in training are not entitled to take part in the examination)
- RIS documentation or logbook with a total record of the candidate's experience in musculoskeletal radiology countersigned by the candidate's programme director
- A letter of support from the programme director or department head
- At least 50 CME credits in MSK events recognized by the ESSR
- CV
- Proof of ESR and ESSR membership in the year(s) of the application and the examination
- Attendance of 2 annual meetings of the ESSR and/or ECR within a 5-year period
- Being first author of an Accepted Abstract for a national/international MSK event recognized by the ESSR

More information under the following link: <https://www.essr.org/diploma/>

- I hereby confirm that I am in possession of all the documents listed on the checklist.

<b>Date</b>	<b>Signature</b>
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