**Nomination Form**

 **for the National Focal Points database**

**Please return this document by email (*focal\_points\_notification@woah.org, cc:*** ***rr.middleeast@woah.org*****) or by Fax (+33 1 42 67 09 87)*.***

**If the focal point is a Member Delegate, please specify this in the box “Position”.**

|  |  |
| --- | --- |
| **COUNTRY**:  |  |

|  |
| --- |
| **Please tick the box corresponding to the topic to which refers this nomination** |
| **National Focal Point****for:** |  | **Aquatic Animals** |
|  | **Animal Disease Notification** |
|  | **Animal Production Food Safety**  |
|  | **Animal Welfare** |
|  | **Communication** |
|  | **Veterinary Laboratories**  |
|  | **Veterinary Products** |
|  | **Wildlife** |

|  |  |
| --- | --- |
| Surname: |  |
| Name: |  |
| Title (Prof, Dr, Mr, Ms): |  |
| Position: |  |
| Organisation/Institution: |  |
| Postal address: |  |
| City: |  |
| Email address: |  |
| Phone number (beginning with Country Code) |  |
| Fax number (beginning with Country Code) |  |

Date: ………………………………………….

Signature/stamp of the Delegate: ………………………………………….