

**SCA Global – Young Investigator Initiative**

**Expression of Interest**

By sending this form, I confirm, that I would like to participate in the SCA Global – Young Investigarot Initiative.

I agree, that my name, Institution and Email-adress will be listed on the SCA Global – Young Investiagor Initiative webpage.

(Please delete, if you do not agree).

Contact details:

First name:

Last name:

Email address:

Department / Institution:

City:

State (if applicable):

Country:

Role (e.g. clinician, neurologist, genetisist, etc.):

Please send back the completed form to:

[yii\_sca-global@posteo.de](mailto:yii_sca-global@posteo.de)

If you have any questions, please feel free to ask using the abovementioned Email address.

We are looking forward to your participation!

Heike & Jennifer