**Registration Form for the CRHPS Data**

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| --- | --- | --- | --- |
| Family name |  | Given name |  |
| Gender | □Male □Female | Birth year |  |
| Institution | |  | |
| Department |  | | |
| Position | □Professor □Associate professor □Lecturer / Research associate □Assistant / Research Assistant □Post-Ph.D. □Ph.D. □Master □Bachelor □Others | | |
| Research Fields |  | | |
| Workplace Address |  | | |
| Telephone Number |  | | |
| E-mail |  | | |
| A Brief description of your research project with the CRHPS dataset: | | | |
| Date of application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(YY/MM/DD) | | | |
| Object of registration: □CRHPS2011 □CRHPS2013 □CRHPS2015 □CRHPS2017 | | | |