



Medical Laboratory Scientist Network - Member Form

Expectations:

- Desire to learn more about best practices in flow cytometry and take it back to your lab.
- You can just listen or actively participate and share your experiences or concerns with other MLS's
- The level of involvement is entirely up to you...this is YOUR safe forum where you will be recognized as a professional cytometrist who is trying to elevate their lab to the next level!

Name _____

Email: _____

Institution: _____

Current Position: _____

Circle all that apply:

- *MD*
- *PhD*
- *Clinical - Medical laboratory scientist (MLS, Medical Technologist or other)*
- *Research - Medical laboratory scientist (MLS, Medical Technologist or other)*
- *Flow cytometry certification (SCYM)*

ICCS Member: ____ Yes ____ No

Year of experience in Flow Cytometry: _____

Type of flow cytometric experience/testing offered: _____

Platform/instrumentation currently used in your lab

Other relevant experience: _____

Please send to International Clinical Cytometry Society info@cytometry.org

Thank you!