





OBSERVATORY VENICE SUMMER SCHOOL 2019

"Skill -mix innovation in primory and chronic care: mobilizing the health workforce"

San Servolo, Venice, 21- 27 July 2019

APPLICATION FORM	1

Please complete this form and send it together with your CV and a picture to: info@theobservatorysummerschool.org

info@theobservatorysummerschool.org	
PERSONAL DETAILS	
Title: MS.	
First Name: Inga	Surname: Paichadze
Date of birth: 10.06.1963	Gender: Female
Nationality: Georgian	
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CONTACT DETAILS	
Institution: Ministry of IDPs from the	Occupied Territories, Labour, Meathand Social Fol Department of Geor
Job title: Main Specialist of Contro	of Department of Geor
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Work shower 1005 DO MO TO COLCO	Mobile phone: +995 547 54 49 99
Work phone: +995 39 42 53 69/68	Fax:
Email: ipaichadreamoh.gov.ge	Ida
PLEASE BRIEFLY DESCRIBE WHY THE COURSE IS RE	LEVANT TO YOUR CURRENT JOB AND FUTURE
EMPLOYMENT PLANS	involved in controlling medical lities all around the country and a requirements of technical regulations is purpose I am involved in a care services that are defined of Georgia "On patients rights", tivity and haw of Georgia to these issues I take aged in our county or abroad
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since May 2012. I am actively	involved in controlling medical
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☐ I have already attended an Observatory Venice	Summer School in (indicate year)
How did you hear about the Summer School?	
M An Observatory announcement/mailing	
☐ The Observatory website	
☐ From a colleague or former Summer School par	rticipant
☐ Other, please specify:	
For more information: www.	theobservatorysummerschool.org