

OSMT Survey

Please give us your opinion on

Education

The OSMT is developing professional development sessions for MLTs and MLA/Ts. Please specify the educational needs of your laboratory:

Discipline (area of need): _____

Description of topics: _____

Name of potential presenter(s): _____

Level of preference: Basic Intermediate Advanced

Preference of timing: Weekday Evenings Saturdays

Type of delivery preferred On-site Web-based Conferences

Have you ever attended an OSMT education session? Yes No

Are you aware that MLTs qualify for QA credits for attending OSMT PD sessions? Yes No

Are you aware that OSMT PD sessions qualify for AHPDF grants? Yes No

May we contact you for further information on this survey? Yes No

Name: _____ MLT MLA/T Other

Are you a current OSMT member: Yes No
Member number _____

Employer: _____

Phone: _____ E-mail: _____

Please complete this survey and fax the form to: 416-485-7660 or mail it to the OSMT office at:
234 Eglinton Avenue East, Suite 402, Toronto, ON M4P 1K5.