



## Application for Technical Committee Membership

A Technical Committee Member is a person who participate in ISTA Technical Committee (TCOM) activities and is admitted by the referent TCOM Chair. To become a TCOM member, an applicant should have a technical knowledge of seed testing and an interest in its development.

***Application for TCOM Membership can be submitted to the ISTA Secretariat at any time, but please note that Membership of the Technical Committees are usually decided during the triennial ISTA Congress. Between Congresses new members are only accepted to replace Technical Committee members whose membership has been cancelled.***

**With this form the application for TCOM Membership is submitted to ISTA.**

(PLEASE TYPE OR USE BLOCK LETTERS)

### Applicant Details (Curriculum Vitae is required)

First Name ..... Surname .....

Position .....

### Technical duties performed

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Company/Institution .....

Address .....

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.....  
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Telephone ..... Fax .....

E-mail .....

Please enclose a **curriculum vitae** and an **up-to-date photograph**.

**Please choose the Technical Committee, which fits to your expertise:**

<input type="checkbox"/>	ATC	Advanced Technologies	<input type="checkbox"/>	SHC	Seed Health
<input type="checkbox"/>	BSC	Bulking and Sampling	<input type="checkbox"/>	SSAG	Seed Science & Advisory
<input type="checkbox"/>	FSC	Flower Seed	<input type="checkbox"/>	STA	Statistics
<input type="checkbox"/>	FTS	Forest Tree and Shrub Seed	<input type="checkbox"/>	STO	Storage
<input type="checkbox"/>	GER	Germination	<input type="checkbox"/>	TEZ	Tetrazolium
<input type="checkbox"/>	GMO	GMO	<input type="checkbox"/>	VAR	Variety
<input type="checkbox"/>	MOI	Moisture	<input type="checkbox"/>	VIG	Vigour
<input type="checkbox"/>	PUR	Purity	<input type="checkbox"/>	PTC	Proficiency Test
<input type="checkbox"/>	WSWG	Wild Species		NOM	Nomenclature

**Please specify the chosen Technical Committee's area of activity by referring to the current TCOM Working Program:**

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**Please specify new ideas for further development:**

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**Place and date**

.....  
**Signature of the applicant**

.....  
**Official stamp**

**Please send back this form and an up-to-date photograph and your curriculum vitae to the ISTA Secretariat by email: [andreea.militaru@ista.ch](mailto:andreea.militaru@ista.ch)**