**Application Form for the Workshop**

**Publish or Perish**

**Skill Development Workshop (one day) on Writing Publishable Manuscript**

**Date:** 16th January 2025.

**Venue:** South Asian Center for Teacher Development (SACTD), Meepe, Sri Lanka

**UNESCO C2C**



Conducted by: **Professor Lakshman Samaranayake**

*Hon DSc (Pera U), Hon Dr (Arm.), DDS, FRCPath, FDSRCPS, FRACDS, FDSRCS(Edin)*

*Professor and Dean Emeritus, Faculty of Dentistry, University of Hong Kong*

*King James IV Professor, Royal College of Surgeons of Edinburgh, UK*

*Editor-in-Chief  International Dental Journal  (link)*

*Google Scholar h-index 101;  Wikipedia link (here)*

**Section 1**: Personal Details

1. Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Designation/Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Organization/Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Official Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 2**: Professional Background

1. Area(s) of Research Interest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Field(s) of Expertise: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Current Projects (if any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 3**: Research and Publication Experience

1. Have you published research papers or manuscripts?

* Yes



* No



If yes, please provide the following details:

* Number of Published Papers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Names of High-Impact Journals (if applicable): \_\_\_\_\_\_\_
* Topics/Subjects Covered in Past Publications: \_\_\_\_\_\_\_

1. Previous Experience in Writing or Editing Research Papers:

* Briefly describe your experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section 4**: Expectations from the Workshop

1. What do you hope to gain from this workshop?
2. Specific Areas of Guidance Required (if any):

**Section 5**: Additional Information

1. Will you be attending the SACTD Research Symposium on 17th January 2025?

* Yes



* No



1. Any special requirements (e.g., dietary preferences, accessibility needs):

**Section 6:** Declaration

I hereby declare that the information provided is true and accurate to the best of my knowledge.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submission Instructions

* Please complete and submit this form via email to [rrs@sactd.edu.lk](mailto:rrs@sactd.edu.lk) no later than 7th January 2024.
* For any inquiries, contact us at +94718064193 (Dr. Jayantha Wattavidanage) or +94714484266 (Dr. D Wijekoon).

**If you are interested in participating, kindly submit your application at the earliest convenience, as slots will be allocated on a first-come, first-served basis (Total No is 40)**