

**New arrivals / departures and change of group form**

<b>Arrival</b>	<input type="checkbox"/>
<b>Departure</b>	<input type="checkbox"/>
<b>Change of group</b>	<input type="checkbox"/>
<b>Employed (paid) by SIB?</b>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Title (Dr, Prof, etc...)	
<b>Gender</b>	Male <input type="checkbox"/> Female <input type="checkbox"/>
<b>First name</b>	
<b>Last name</b>	
<b>Birth date</b>	
Marital status	
<b>Position</b>	
<b>SIB Group name (not Group Leader's name)</b>	
<b>Department (if any)</b>	
<b>Group Leader's name</b>	
<b>Professional address</b>	
<b>Professional ZIP code, city</b>	
<b>Office phone</b>	
<b>Office fax</b>	
Office name / number	
<b>Professional email for redirecting isb-sib.ch</b>	
Web page (if any)	
Type of contract	
<b>Starting date</b>	
<b>End date (if any)</b>	
<b>Employment rate</b>	
Private address	
ZIP code, city	
Private phone	
Mobile phone	
<b>Private email</b>	

**All the fields in bold must imperatively be filled in in order to become a SIB member!  
Please enclose a good quality portrait picture of 142x95 pixels (for arrivals)**

Please announce any collaborator (also students or trainees) staying **more than 3 months**  
Send this form back to Sylvie.Clottu@isb-sib.ch