

# Application form PEROSH membership.

Please fill in this form and send it to [janmichiel.meeuwsen@perosh.eu](mailto:janmichiel.meeuwsen@perosh.eu). Thank you.

## Personal details applicant:

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contactperson(s): \_\_\_\_\_

## General:

Yes

No

Are you considered as the key national player in OSH in your country? \_\_\_\_\_

Are you willing to contribute to the financing of the PEROSH secretariat (10.000,- p/y) \_\_\_\_\_

Apart from the annual contribution fee are you willing to participate with researchers in PEROSH activities? \_\_\_\_\_

Briefly describe your organization:  
\_\_\_\_\_  
\_\_\_\_\_

What is your role in the national OSH infrastructure?  
\_\_\_\_\_  
\_\_\_\_\_

In which way are you associated with ministries, social partners or health and public accident insurance schemes?  
\_\_\_\_\_  
\_\_\_\_\_

Please give a short overview of research activities and featured publications:  
\_\_\_\_\_  
\_\_\_\_\_

## Conditions for membership (from PEROSH agreement 2018-2022)

Key national players in occupational safety and health who are associated with ministries, social partners or health and public accident insurance schemes may apply for membership. Those organisations should carry out or finance substantial OSHresearch. There shall be only one member institution per country except where the majority of the existing members agree otherwise. All members shall contribute to financing a PEROSH Secretariat in accordance with the provisions of article 4.3. New members shall be approved by a majority decision of the Steering Committee.