



Date:

The Organizing Committee

CCOI Asia-Pacific Innovation Forum 2026

To whom it may concern,

Re: Resident/Trainee Status Certification

This is to certify that _____ (Name of Resident/Trainee) with the registration code _____ has received training in ophthalmology for less than 6 years and will still be a 'full-time trainee' during the CCOI Asia-Pacific Innovation Forum from February 3 – 4, 2026. Should you need further information, please feel free to contact me by phone at _____ or by email at _____.

Yours sincerely,

_____ (Name of Supervisor)

_____ (Position)

_____ (Institute)