APPLICATION FORM

YAO 2002

Volterra (Italy) 13-18 April 2002

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or
E-mail to: yao2002@df.unipi.it

Name and Surname:_____

Male ☐ Female ☐

Degree:_____

Present Position:_____

Research Field:_____

Institution:_____

_____

Is your Institution a member of a European Training Network?

CQG ☐ CAUAC ☐ None ☐ Others ☐ (Specify _____)

Presentation: Oral ☐ Poster ☐

Title of presentation: _____

_____

Do you ask for a conference fee grant?

Yes ☐ No ☐

Do you ask for travel expenses support?

Yes ☐ No ☐

Address: _____

_____

City:_____

Country:_____

Phone and Fax number:_____

E-mail:_____