



★ Financial Support Application ★
ESCAMPIG 17th
1-5 September 2004, Constanta, Romania

Participant:

**** Please complete this form in BLOCK LETTERS and by inserting x in O ****

Title:

First Name:

Family

Name:

Affiliation:

Address of correspondence:

Street:

City:

ZIP code:

Country:

Phone:

Fax:

E-mail:

Type of support requested:

Registration fee

Accommodation in Students Dormitory

Please Explain why you wish to attend this conference and the reason of your request for a support (max. 200 words).

With this form please include:

- 1- For students: a letter of recommendation from your supervisor and reference of publications.
- 2- A copy of your submitted abstract (s).

Date:

Signature:

★ Please complete this form and send it as soon as possible, but not later than 15 July, directly by Fax to the hotel you choose.

★ It is recommended to send also a copy of this form, by Fax, E-mail or mail to the Secretariat of ESCAMPIG R. Vladoiu, OVIDIUS University of Constanta, 124 Mamaia Avenue, Constanta, 900 542, Romania

Fax: (40) 241 61 83 72 E-mail: escampig@univ-ovidius.ro