



7th ASECU Youth International Conference and Summer School

**“History is back. Institutional Socioeconomic & Business Challenges
in a rapidly changing world”.**

20-27 August, 2017 Possidi, Kalandra - Chalkidiki, Greece

PROFESSOR’S APPLICATION FORM

PHOTO

Please complete the Application Form TYPING in Capital Letters.

Topic of lecture	
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PERSONAL Details

First Name	
Middle Name	
Last Name	
Date of Birth	

<input type="checkbox"/> Male
<input type="checkbox"/> Female

Please complete the Nr of the document **by which you are going to travel**

Passport Nr	Identity card Nr
Origin (as it is mentioned at the document)	

Will you need visa for visiting Greece?	
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CONTACT details

University Post Mail address	
Home Post Mail address	
Emailing Address(es):	
☎ Mobile Tel. Nr (with country code)/..... (Country code) / (Tel nr)

ACADEMIC Information

Name of University	
Faculty / Department	
City, Country	

IV. Additional information

Indicate any special dietary needs or/and food preferences (if applicable):

.....
.....

I understand and I accept that my name and contact information will be include to the list which will be given to all the participants of the ASECU Youth 7th Meeting

Pls note if disagree:.....

Date

Signature:.....