

AAF 2018 Summer University Registration Form

Applicant	First Name:	Last Name:	Email:
Affiliation			
Registration Fees	PhD Student 3 000 DA <input type="checkbox"/> <small>(by transfer or money order no later than 7 days after the notification)</small> 5 000 DA <input type="checkbox"/> <small>(on the spot the day of the event opening)</small>	Faculty Member 10 000 DA <input type="checkbox"/>	Other 15 000 DA <input type="checkbox"/>
Accommodation University Room	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Topics of interest and Last obtained Degree			
Thesis Title			
Thesis Director	Name: Contact:		
Resume of Thesis (up to 100 words)			

Keywords			
Submit Poster Deadline: June 10th, 2018	Yes <input type="checkbox"/>	No <input type="checkbox"/>	if Yes, Title: <hr style="border: 0.5px solid black;"/> if Yes, Abstract: <div style="height: 150px;"></div>

A brief CV of the applicant should be sent attached to this registration form