

New Page



DAAAM AUTHOR QUESTIONNAIRE

Use as many pages (space) as you need!

PAPER DATA

Name and email address of corresponding author:
This paper will be presented (oral presentation / poster):
This paper will NOT be presented at Conference please send the Proceedings to following address:
Please send PDF Offprints of Paper to following e-mail address:

AUTHORS DATA

Please fill this questionnaire (use as much space/pages as you need). Author's data must be completed for all authors and coauthors! All data from No1 till 10 must be completed. (Digital photo we need for DAAAM International Authors Gallery / Full names for the indexing and referring of your paper in different data bases and DAAAM International Bibliography which will be published in order to celebrate 20 Years of DAAAM International)

1. Digital Photo (not to small):
2. First / Middle / Family Name (Full names not initials only!):
3. Academic Titles:
4. Position / Since:
5. Institution:
6. Place, Date and Country of Birth (yyyy-mm-dd):
7. Nationality / Citizenship:
8. Field of interests (key words):
9. Hobbies:
10. E-mail address:
11. Site:
12. Phone & Fax #:
13. Postal address:
14. In wich DAAAM activities are you interested (We have many of possibilities such as: publishing of paper, to be active member of one of our international committees, official photograph of daaam international, reviewer of papers and manuscripts, supporter, sponsor, organizer. others). Please write your choice:
15. Place & Date:
16. 16. Additional CV data (optional):