
 ***Language Instruction in Tertiary Education for the Students of Natural Sciences***

Registration Form

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| --- | --- |
| **Name and surname****(incl. degrees)** |   |
| **Affiliation** |   |
| **Invoice details (name of institution, official address, IČO/Identification number)** |   |
| **E-mail**  |   |
| **Preferred time** |   19 June morning / afternoon |
| **Workshop or presentation** | workshop / presentation  |
| **Title of the paper** |  |
| **Abstract** |  |
| **Additional requirements (vegetarian food, equipment needed…)**  |  |

**Please return to vyuka.jazyku@sci.muni.cz**phoneconference@gmail.co