**ABSTRACT SUBMISSION FORM**

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| **Title** | Mr / Mrs / Ms / Dr / Prof |
| **First Names** |  |
| **Surname** |  |
| **Institution (if applicable)** |  |
| **Department (if applicable)** |  |
| **Country** |  |
| **Email** |  |
| **Cell phone** |  |
| **Present paper** | Online or At conference venue |

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| **Provide a short CV** (not more than 150 words) |

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| **Provide one high resolution image of yourself** |

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| **Title and Abstract** (Minimum of 150 and maximum 400 words) |

**Contact details**

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