

REGISTRATION FORM

3rd Regional Consultative Workshop on “National Innovation System
and Intellectual Property” (Arab Region)

October 5-7, 2015

Tunis, Tunisia

Participant's Details	
Name (as per Passport):	
Designation:	Institution/Organization:
Highest Qualification:	Present Field of Activity:
Mailing Address:	Tel:
	Fax:
	Email:
City:	Country:
Title of Talk:	
Via Letter Request	
Passport No.:	Nationality:
Date of Birth:	Passport's Expiry Date:
Only for Foreign Participants	
Boarding & Lodging Required? (Yes/No):	
Travel Grant Required? (Yes/No):	

IMPORTANT NOTE:

Please email this form along with copy of **Passport**, **CV** and **Abstract of Presentation** (if any) to Mr. Tajammul Hussain, Advisor (Programmes), COMSATS Headquarters, Islamabad, Pakistan (husseint@comsats.net.pk)