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**University of Warsaw**

**Faculty of Political Science and International Studies**

**Institute of European Studies**

***CONFERENCE REGISTRATION FORM***

***Global Consequences of One Belt, One Road***

**7June 2017**

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| --- | --- |
| Participant’s data | |
| Name and surname |  |
| Phone number |  |
| e-mail address: |  |
| Academic title or degree: |  |
| Affiliation: |  |

|  |  |  |
| --- | --- | --- |
| Paper proposal | | |
| Title of a paper: | | |
|  | | |
| Keywords: | | |
|  | | |
| Abstract (1300 - 2000 characters with spaces): | | |
|  | | |
| Do you require multimedia projector : | YES | NO |

To register submit your filled in registration form by **April 9th, 2017** to **dknsuw@gmail.com**

In the subject of email please include title of the conference and your name.

Abstract selection will be announced before **April 30th, 2017.**