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| **1.  Personal Status** | | | | | | |
| Name: |  | | | | | |
| Organization or University: |  | | | | | |
|  |  | | | (i.e. Full Professor/ Associate Professor/ Assistant Professor/ Lecturer/ Ph. D Candidate/ Postgraduate/ etc.) | | |
| Title/Position: |
| Membership: |  | | | (i.e. SIE Fellow/Senior Member/Member ) | | |
| City: |  | | | State: |  | |
| Country: |  | | | Post Code: |  | |
| Telephone: |  | | | Fax: |  | |
| Mobile: |  | | | Email: |  | |
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| **2.  Conferences Applying, please fill:** | | | | | | |
| Cooperate Conference | | | [www.icdip.org](http://www.icdip.org) | | | |
| When do you want this conference to be held? |  | | (i. e. *26-27, June, 2013*, 26th is for reception, while 27th is for conference.) | | | |
| Conference Venue: | In College/ University： | |  | | | *Free( ) | Charge( )* |
| In Hotel： | |  | | | *Free( ) | Charge( )* |
| Please list any Financial Support from your affiliation or other organizations? | |  | | | | |
| What are your advantages to make this conference successful? | | |  | | | |
| Tentative Conference Committee & Keynote Speakers | | | | | | |
| Honorary Chairs |  | | | | | |
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| Conference Chairs |  | | | | | |
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| Program Chairs |  | | | | | |
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| Keynote Speakers |  | | | | | |
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| Instructions: | | | | | | |
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