# Registration Form

Please fill in all the compulsory fields of this form and send it back to us by email (florence.trauscht@ei-ie.org) or by fax +32 2 24 0606 **by 31 May if you require assistance**, and **by 15 June if you do not**. You may also fill in this form on our website: ei-ie.org/highereducation

|  |
| --- |
| Personal particulars |
|  |

Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of organisation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Tel : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax (if any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dietary requirements (if any):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[ ]  *Yes, I would like to take part in the official dinner on 25 September 2012.* [ ]  *No thanks.*

|  |
| --- |
| Choice of sessions |
|  |

To help us determine the best ways to allocate resources for simultaneous interpretation, please fill in your choice of working groups and concurrent session.

Working Group 2 on Wednesday 26 September from 4 pm to 5.30 pm (please mark in order of preference 1- 4 with 1 being your most preferred choice)

\_\_\_\_\_\_ Organizing and membership recruitment

\_\_\_\_\_\_ Accountability, rankings and assessment

\_\_\_\_\_\_ The economic crisis and higher education and research

\_\_\_\_\_\_ Promoting equity and diversity

\_\_\_\_\_\_ The status of researchers

|  |
| --- |
| Financial assistance |
|  |

[ ]  *Yes, I would like to apply for financial assistance to attend this conference.* [ ]  *No thanks.*

**\*If you tick YES, please submit this form by 4th June 2012.**

**Please state the type of assistance required, e.g. travel, accommodation etc.**

|  |
| --- |
| Hotel reservation |
|  |

**Castelar Hotel & Spa**

**Av. De Mayo 1152 (C1085ABO) - C.A.B.A. - Argentina –**

**Tel. (54-11) 4383-5000 / 9 Fax. (54-11) 4383-8388**

The special price for the participants of this conference will be:

USD 125 for single/double room

Price include breakfast and VAT.

|  |
| --- |
| Visa |
|  |

[ ]  I need a letter of invitation from EI to secure an entry visa into Argentine

[ ]  I need a letter of invitation from EI to secure a transit visa

Visa Information
*Please complete if you need a letter of invitation for an entry or/and transit visa.*

Name (as appears in passport): .............................................................

Passport number: ……………………………………………………………

Date of issue: ………/………/…………… Country of issue: ……………………………………………………………

Expiry Date: ………/………/……………

|  |
| --- |
|  |
|  |

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please send this back to us by email (florence.trauscht.ei-ie.org) or by fax +32 2 24 0606 **by 31 May if you require assistance**, and **by 15 June at the latest**.

You will receive confirmation of your participation request by email or by fax.