**FORM-5**

**CONGRESS APPLICATION FORM**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **WRITE THE NAME OF THE CONGRESS YOU WANT TO PARTICIPATE**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CONGRESS** | | | | | |
| **NAME SURNAME** | **E-MAIL**  **ADDRESS** | **TITLE OF THE PAPER / ENGLISH** | **UNIVERSITY, FACULTY, DEPARTMENT, CITY, COUNTRY** | **MOBILE TELEPHONE NUMBERS** | **ORCID ID** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **CORRESPONDING AUTHOR'S INFORMATION** | | | | | |
| **NAME SURNAME** | | **AUTHORS**  **E-MAILS** | | **MOBILE TELEPHONE NUMBERS** | |
|  | |  | |  | |

*\* Submit your abstract in the same file as Form-5.*

**Title:** **TIMES NEW ROMAN, 12 PT, BOLD**

Name Surname1

1University, Faculty, Department, City, Country.

1ORCID ID: https://orcid.org/0000-0000-0000-0000

1authors e-mails, mobile telephone numbers:

Name Surname2

2University, Faculty, Department, City, Country.

2ORCID ID: <https://orcid.org/0000-0000-0000-0000>

2authors e-mails, mobile telephone numbers:

**Abstract**

In this template, the congress formatting requirements are described. The abstract should be at least 300 words, including spaces and summarise the main points of the paper. Font should be Times New Roman, font size 12 pt. Page Margins: Top, bottom, left and right margins must be set to 2,5 cm. Do not add paragraph spacing. All papers should be written as \*.doc or \*.docx format and they should be submitted to email address of conference website.

**Keywords:** 3-6 words.