|  |  |
| --- | --- |
|  | **VI Congress of Mathematicians of Macedonia**June 15−18, 2016Ohrid, Republic of Macedonia  |

|  |
| --- |
| **INVITATION LETTER FORM****Submission deadline June 1, 2016** |

Please complete the form below and send it to cmm.smm.2016@gmail.com

|  |
| --- |
| First Name: |

|  |
| --- |
| Last Name: |

|  |
| --- |
| Passport No.: |

|  |
| --- |
| Date of Birth: |

|  |
| --- |
| Affiliation: |

|  |
| --- |
| Address: |

|  |
| --- |
| Country: |

|  |
| --- |
| E-mail: |

**Participant of:**  Seminar 1:    Seminar 2: 

**Type of contribution:**  A. Plenary lecture    B. Short Communication    C. Poster

**Section** 

|  |
| --- |
| **Tentative title:**  |

In case of multiple number of short communications and/or posters, please copy the previous two lines and fill in the necessary information.

Workshop participant: yes  no 

|  |
| --- |
| Please type the workshop title here |

If invitation letter is needed for the accompanying person(s) as well, then please copy the first 7 lines of this form and fill in the necessary information.