**Workshop/Short Course Proposal European Microwave Week 2021**

**Please note the deadline for submission of this proposal is 23:59 (GMT), Sunday, 27th June 2021**

For any questions please contact Dr. Chong Li / Dr. Qammer H. Abbasi ([workshops@eumw2021.org](mailto:workshops@eumw2021.org)).

**Organiser 1 Organiser 2**

|  |  |  |  |
| --- | --- | --- | --- |
| |  |  | | --- | --- | | Name:  Affiliation:  Department:  Email:  Phone: | Name:  Affiliation:  Department:  Email:  Phone: | |  |

|  |  |  |
| --- | --- | --- |
| Type1  Workshop (WS)  or  Short Course (SC) | Duration  Half-day  or  Full-day | Conference2  EuMC  or  EuMIC  or  EuRAD |

**Workshop/Short Course Title:**

|  |
| --- |
| **Workshop/Short Course Abstract** (*max 250 words*)**:**  Keywords (Max.5) |

1Workshops are intended to address state-of-the-art topics with an expert audience, whereas short courses have an educational purpose and are directed also to non-expert audience members.

2Choose one of the three conferences that suits your WS/SC the best.

**Important Information**

* Accepted workshops/short courses will be scheduled for one of the workshops days of the EuMW 2021 (mainly on the Sunday, Monday and Friday of EuMW 2021). The assigned date and time slot cannot be changed and the organisers are expected to inform the speakers accordingly.
* Notification of acceptance of proposals is 31st July 2021.
* Submission of finalised proposal is 31st August 2021.
* It is the responsibility of the organisers to upload the presentation slides, including the presentation slides of ALL speakers, before **9 am (GMT), 20th December 2021** (1 colour slide per A4 page in pdf format).
* The maximum numbers of speakers for each proposal is expected to be between 4 to 6 for half-day, and between 8 to 12 for full-day.
* Workshop fee waivers will be granted to the workshop organisers (maximum two) and workshop speakers (one per presentation) upon reception of the final presentation slides. Fee waivers will not be granted if the final presentation slides are not uploaded before the deadline.
* Please note that fee waiver applies ONLY to the specific workshop and NOT to other events taking place during the week. Therefore, workshop speakers and workshop organisers must register and pay the fees for the other events they wish to attend (EuMC, EuMIC, EuRAD, DSS forum, other WS/SC etc.).

**Declaration: We have read and understood the above important information and shared this information with all the Speakers who also understood:** (Yes/No)

Please complete the rest of the form only if your answer to the above question is “Yes”.

**Please indicate here if you have any special requests (e.g. disable access etc.):**

|  |
| --- |
|  |

**Speaker information**

|  |  |
| --- | --- |
| **1. Speaker's Name:** | **Confirmed (yes/no):** |
| **Affiliation:** | |
| **Presentation Title:** | |
| **Speaker’s Email:** | |
| **Summary (2-3 sentences):** | |

|  |  |
| --- | --- |
| **2. Speaker's Name:** | **Confirmed (yes/no):** |
| **Affiliation:** | |
| **Presentation Title** | |
| **Speaker’s Email:** | |
| **Summary (2-3 sentences):** | |

|  |  |
| --- | --- |
| **3. Speaker's Name:** | **Confirmed (yes/no):** |
| **Affiliation:** | |
| **Presentation Title:** | |
| **Speaker’s Email:** | |
| **Summary (2-3 sentences):** | |

|  |  |
| --- | --- |
| **4. Speaker's Name:** | **Confirmed (yes/no):** |
| **Affiliation:** | |
| **Presentation Title:** | |
| **Speaker’s Email:** | |
| **Summary (2-3 sentences):** | |

|  |  |
| --- | --- |
| **5. Speaker's Name:** | **Confirmed (yes/no):** |
| **Affiliation:** | |
| **Presentation Title:** | |
| **Speaker’s Email:** | |
| **Summary (2-3 sentences):** | |

|  |  |
| --- | --- |
| 6**. Speaker's Name:** | **Confirmed (yes/no):** |
| **Affiliation:** | |
| **Presentation Title** | |
| **Speaker’s Email:** | |
| **Summary (2-3 sentences):** | |

|  |  |
| --- | --- |
| 7**. Speaker's Name:** | **Confirmed (yes/no):** |
| **Affiliation:** | |
| **Presentation Title:** | |
| **Speaker’s Email:** | |
| **Summary (2-3 sentences):** | |

|  |  |
| --- | --- |
| 8**. Speaker's Name:** | **Confirmed (yes/no):** |
| **Affiliation:** | |
| **Presentation Title:** | |
| **Speaker’s Email:** | |
| **Summary (2-3 sentences):** | |