**The 2017 Mock IMO Assembly**

**Application for presentation**

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| --- | --- |
| Name of Univ. |  |
| Contact Person |  | Department |  |
| Tel. |  | Email. |  |
|  |
| **Presentation Desired Date & Time** |
| First | (Date)  | (Time) |
| Second | (Date)　 | (Time)　 |
| Third | (Date) 　 | (Time)　 |
| **Presentation Place** |
|  |
| **Expected Number of Attendees** |
|  |

\* We are planning to hold a presentation in university to inform professors and students who are interested in participating in the Mock IMO Assembly of the purpose and the process of the contest. For those who want to hold the presentation in the university, please fill in the application form and submit it to the secretariat (info@imo-contest.org).

The presentation will be held for about 30 mins.