



APPLICATION FORM – Panel

1 | Chosen Conference Theme:

- | | |
|--|---|
| <input type="checkbox"/> 1 Imperial, Colonial, Post-colonial and Anti-colonial geographies | <input type="checkbox"/> 6 Critical “Development” Geographies: perspectives from the Global South |
| <input type="checkbox"/> 2 Articulations and spaces of capitalism | <input type="checkbox"/> 7 Geography and matter / materiality |
| <input type="checkbox"/> 3 Migration, Mobility and Displacement | <input type="checkbox"/> 8 Remaking Space through Ideology, Culture, and Arts |
| <input type="checkbox"/> 4 Nature, Society and Environmental Change | <input type="checkbox"/> 9 Knowledge Production, Education and Epistemic Agendas |
| <input type="checkbox"/> 5 Mapping Bodies, Corporeality and Violence | |

2 | Personal Information

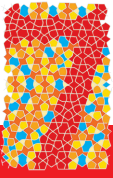
Name	Surname
Gender <input type="checkbox"/> female <input type="checkbox"/> male <input type="checkbox"/> other	Nationality
e-mail	Tel/Mobile
Institutional Affiliation	Title
	Position
BIO	

3 | Panel Description:

Single Panel Panel Series ; this one is no. of

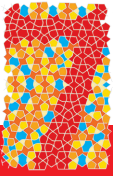
Series
Title *if applicable*: _____

Panel
Title: _____



Abstract:

Abstracts should be maximum 500 words long.
Abstracts must include the panel's main question/concern, purpose, and relevant methods.
If this Panel is part of a Series, the abstract should specify relation to the other panels.
By submitting an abstract, you are granting the ICCG 2015 permission to publish it in the
abstract compilation and to disseminate it electronically.



APPLICATION FORM – Panel

Name
Surname

4 | Presenter Information [max. 4]

-1- *Presenter* *Chair*

Name Surname

Gender female male other Nationality

e-mail Tel/Mobile

Institutional Affiliation Title

Position

Bio

-2- *Presenter* *Chair*

Name Surname

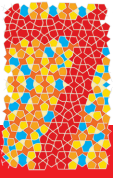
Gender female male other Nationality

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Position

BIO



APPLICATION FORM – Panel

Name
Surname

-3-

Presenter

Chair

Name

Surname

Gender

female

male

other

Nationality

e-mail

Tel/Mobile

Institutional
Affiliation

Title

Position

BIO

-4-

Presenter

Chair

Name

Surname

Gender

female

male

other

Nationality

e-mail

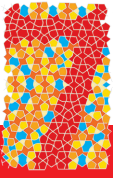
Tel/Mobile

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APPLICATION FORM – Panel

Name
Surname

If other than aforementioned persons *Chair*

Name

Surname

Gender

female

male

other

Nationality

e-mail

Tel/Mobile

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Affiliation

Title

Position

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Place, Date

Signature

Thank you for your interest in ICCG 2015!

Kindly send the **complete** and **signed** form to submit@iccg2015.org

Deadline for submissions is **1 December 2014**