**BMAS Summer School 2021 Application Form**

Document name: First name\_Last name\_BMASSS2021

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| **Poster presenting Author**   |
| First name  |  |
| Last name |  |
| Affiliation  |  |
| Email address |  |
| Title (PhD student, PostDoc, etc.) |  |

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| **Abstract details** |
| Title |  |
| Authors (insert all authors here) |  |
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| Keywords (max 5) |  |
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Do you want your abstract published? Yes No

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| --- |
| **Motivation letter** |
| Brief description of your project and highlights of your carrier |
| How the summer school will help you to achieve your career goals. |

Send the form with all the information to ***bmas\_summerschool@biomed.cas.cz***