**Registration Form**

**Full Name:**

**University/Organization:**

**Highest Qualification:**

**Affiliation:**

**Department:**

**City:**

**Country: Telephone: ( )**

**Email:**

**Do you require accommodations?**





**Please check appropriate registration fee:**













1UoD = University of Duhok

2CoS = College of Science – Duhok

* **The registration fees will cover;**
* The entrance for all sessions.
* All coffee breaks.
* Participation documents.
* Conference meals (Lunch & dinner).
* Conference materials, Conference Bag (abstract booklet, pen, gift etc).

**Please check appropriate Payment Method**





**Please email the completed registration form to:** [icst.info@uod.ac](mailto:icst.info@uod.ac)