

Conference/Seminar Proposal

1. Centre / School

2. Name of the conference / seminar

3. Date of the conference / seminar

4. Academic field(s)

Tourism &
Hotel Management

Prevention, Safety
& Security

Archival & Records
Management

5. Mode of delivery

Presential

Semipresential

Online

6. Director of the conference / seminar

Full name:

Email address:

Telephone:

Contractual relationship with the FUAB:

7. Centre responsible for the study:

8. Credits/Duration of the conference / seminar

9. Collaboration with external institutions:

Yes No Which ones?

10. Brief description of the conference / seminar

Signature of the Director of the conference / seminar

Date: