**SUMMER SCHOOL GENDER EQUALITY AND QUALITY OF LIFE.**

**POLICY-MAKING IN TIMES OF NEW GENDER REGIMES**

**30.08-04.09.2015**

|  |  |
| --- | --- |
| personal infoRmation |  |
| **Full name:** |  |
| Affiliation: |  |
| Postal address: |  |
| E-mail address: |  |

|  |  |  |
| --- | --- | --- |
| travel information |  |  |
| When do plan to come to Poland? | [DD/MM/YYYY] | |
| When do you plan to come back to your place of residence? | [DD/MM/YYYY] | |

|  |  |
| --- | --- |
| Nutrition needs |  |
| Do you have any special nutrition needs, like gluten-free, lactose-free, vegetarian, vegan etc? Please indicate, if any. |  |

|  |  |
| --- | --- |
| additional remarks |  |
| Please indicate any additional remarks concerning your stay in Poland, like allergy information or questions concerning your stay etc, if any. |  |