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| ***EUPhilBio\_2023*** |
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| **Questionnaire\_01 1** |
|  |
|  | **Full name** |  |
|  |  |
|  | **Country** |  |
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|  |
| ***General queries*** |
|  |
|  | I am a philosopher of biology | Yes | No |
|  |
|  | I am a theorist of biology | Yes | No |
|  |
|  | I am an experimental biologist | Yes | No |
|  |
|  | None of that? Right, please, tell us what you are then |  |
|  |
|  |
| ***Specific queries*** |
|  |
|  | I will participate in *EUPhilBio\_2023* with an oral presentation | Yes | No |
|  |
|  | I will participate in *EUPhilBio\_2023* without a presentation | Yes | No |
|  |
|  |
|  |
|  | The tentative title of my presentation 2  |  |
|  |
|  | The final title of my presentation |  |
|  |
|  |
| ***Special queries*** |
|  |
|  | I have special requirements 3 |  |
|  |  |
|  | I want to emphasize, add or ask something else |  |
|  |  |
|  |  |
|  | **1** We kindly ask you to send the completed questionnaire to Miss Tea Barić at tea.baric@ffrz.hr; a kind reminder will be sent at the end of January 2023 but for more details on the *EUPhilBio\_2023\_course\_of\_events* please consult our [web page](https://www.ffrz.unizg.hr/euphilbio_en/euphilbio_2023_en/)2 You will be asked for a final title before the closure of *EUPhilBio\_2023\_Program*3 Disability and/or food preferences (the Organizer might not be able to meet the latter) |
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