Application/Contact form for participants :

Last Name :		First name :	
Institution :			
Country:			
General Research field :			
Actual position (tick corres	ponding box) :		
Master student	PhD F	Post-doctoral fellowship	Permanent Researcher
Other (please specify) :			
Motivations for the summer school (up to 1000 Characters incl. spaces):			
If friendship between partico-participants:	cipants, co-travels, (car-pools, etc, please mention s	shortly with names of
Please return this form by	E-mail to BlueCarb	oon2023@univ-lille.fr with a	Short Curriculum vitae.