

INTERNATIONAL OPPORTUNITIES EXPO EXHIBITOR REGISTRATION

OMB Number: 0925-0740 (Expiration Date: May 2019)

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The NIH Visiting Fellows International Opportunities Expo will be held on DATE, from TIME to TIME in the NIH on the NIH campus in Bethesda, MD.

This Expo, organized by the NIH Visiting Fellows Committee, will provide an opportunity for science and technology representatives from international organizations such as embassies, industry, governments, academic institutions, and the private sector to meet with Visiting Fellows of the NIH in an atmosphere encouraging the exchange of information and the fostering of professional relationships.

There is no charge to exhibit at the fair, but space is limited. Exhibitors will be provided with a 5-ft table and several chairs.

In addition to the Exhibitor Fair, exhibiting participants will have the option to give a brief informational presentation. If you are interested please be sure to make the appropriate indication in the registration. The exhibits and concurrent presentations are tentatively scheduled from TIME to TIME.

Questions? NIH Office of Intramural Training & Education http://www.training.nih.gov OITE@mail.nih.gov 301-496-2427

PRIMARY POINT OF CONTACT (POC) Title:* \$\infty\$ First Name (Given Name):*

| Last Name (Family Name):* |
|---|
| |
| Position Title:* |
| |
| |
| Primary Contact Email:* |
| We cannot guarantee your participation if you fail to provide a functioning email address. |
| |
| Phone Number:* |
| |
| |
| Will you be attending this event in person?:* |
| If you have additional personnel attending, please add their relevant information in the sections provided at the end of this registration. |
| ○ Yes ○ No |
| |
| |
| ORGANIZATION INFORMATION |
| Name of Organization:* |
| |
| Type of Organization:* |
| ○ Embassy ○ Government ○ Academic ○ Industry ○ Private sector ○ Other |
| If 'other' type of organization applies, please specify.: |
| The other type of organization applies, please specify |
| |
| Organization Location:* |
| (City, State, Country) |
| |
| Country Represented:* |
| (if applicable) |
| |
| |
| Organization Website:* |
| (include http://) |
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In addition to the tables that we will provide Exhibitors for the Exhibitor Fair, we are also providing Exhibitors with an opportunity to give a brief (20 minute) presentation about their organization, funding or employment opportunities, etc, that may be relevant to the attending fellows.

| Do you want to give a 20-min presentation:* |
|---|
| If you click YES, you will be sent presentation details. If you require more time for your presentation please indicate so in the comments/questions box at the end of this registration. |
| ○ No ○ Yes |
| FIRST ADDITIONAL ATTENDEE INFORMATION Is the Point of Contact for this registration also the First Attendee?* Yes No |
| Title - First Attendee: |
| First Name - First Attendee: |
| Last Name - First Attendee: |
| Position Title - First Attendee: |
| Email Address - First Attendee: |
| We cannot guarantee your participation if you fail to provide a functioning email address. |
| |
| Phone Number - First Attendee: |
| SECOND ADDITIONAL ATTENDEE INFORMATION Title - Second Attendee: |
| First Name - Second Attendee: |

| Last Name - Second Attendee: |
|---|
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| Position Title - Second Attendee: |
| Email Address - Second Attendee: |
| We cannot guarantee your participation if you fail to provide a functioning email address. |
| |
| Phone Number - Second Attendee: |
| Before you submit your registration, double check the accuracy of the information entered above. We will be sending future emails containing additional information regarding the day's events and any additional details. We look forward to seeing you at the Expo. |
| Submit Survey Cancel |

