Attachment 2

International University Student Architectural Design Competition

Application Form

|  |  |
| --- | --- |
| Project Name |  |
| Participant Name |  | Nationality |  | PositionTitle |  |
| School  |  |
| Address( in details) |  | Zip Code |  |
| Telephone Number (office) |  | Mobile Phone Number |  | Fax  |  |
| E-mail Address |  |
| Co-author |  |
| Mentor Name  |  | Contact Number  |  |

Note: This form can be photocopied, filled in and sent to Weihai Architectural Culture Media Center by e- mail before May 30, 2017.

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