CSAJ Annual Meeting 2025	Application form A:
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for the program making

(a) Name of author(s) and affiliation	
Presenter:	Affiliation
Coauthors:	Affiliation
(b) Title of the presentation	
(c) Contact Information of corresponding aut	nor (Name, Affiliation, Address, Tel, E-mail, etc.)
	, , , - , - , - , -
(d) Preferable type of presentation □ora	l 🗆 poster
(e) A few research keywords which cover your	study (
(f) Presentation award nominee \Box yes	(birthday:) 🗆 no
(*Eligible: CSAJ member / student membe	er, present at CSAJ2023 and born after 2 Apr. 1992)

CSAJ Annual Meeting 2025 Application form B:

for the review by the referees

(g) Title of the presentation		
(h) Preferable type of presentation	\Box oral	\Box poster

(i) Abstract of the presentation (m	200 naximum	words).
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