

Application form - Call for paper Milano 2010

Name of the speaker _____

Name of the company _____

E-mail _____

Tel _____

Brief description of the speaker (work experiences, job title, ...):

Title of the presentation

Brief description of the presentation (50 – 200 words):

Level of the target audience:

Please, put a cross in the box choosing among the following:

- Foundation level of IT Service Management**
- Intermediate level of IT Service Management**
- Advanced level of IT Service Management**

Please, note that the itSMF Italy Evaluation Committee is responsible for evaluating and approving.

Please, send this form back to itSMF Italy :

email. segreteria@itsmf.it

fax. 011 67.55.75

The Undersigned _____, being fully informed about art. 11 of law decree no. 196 dated 30th June 2003 and what hereinafter specified, STATES, according to art. 10 of law decree no. 196 of 2003, that he/she freely gives his/her consent to the treatment of the personal data for any operations connected with itSMF Italy activity within the legislative, statutory and contractual provisions.

Date

Signature
