**Declaration Form for Symposium on Space Science and Technology 2020**

**Title of Abstract**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | |
|  | | | | | | |
| **Author for Correspondence** | | | | | | |
| **Ms. Mr. Dr. Prof. Other**  **Name as it appears in the Abstract :** | | | | | | |
| **Address for communication : ( not necessarily the office address)** | | | | | | |
|  | | | | | | |
|  | | | | | | |
|  | | | | | | |
| **For Communication** | | | | | | |
|  | | **Tel** | **Fax** | | **E-mail** | |
| **Office** | |  |  | |  | |
| **Residence** | |  |  | |  | |
| **Mobile** | |  |  | |  | |
|  | **Authors** ( Author for Correspondence is responsible for obtaining the signatures) | | | | | |
| **Numbering** | **Name as it appears in the Abstract** | | | **Contact Telephone # and Fax #** | | **Signature** |
| **1.** |  | | |  | |  |
| **2.** |  | | |  | |  |
| **3.** |  | | |  | |  |
| **4.** |  | | |  | |  |
| **5.** |  | | |  | |  |
| **6.** |  | | |  | |  |