**Expression of Interest form for EFFoST2025**

Please provide the following information in a short and concise format to express your interest in hosting the 39th EFFoST International Conference. A more comprehensive overview of this information is required in the second round of the bid process. Send your Expression of Interest to Jeroen Knol at info@effost.org

**Part I – Scientific programme**

**Hosting Organisation details**

Name:

Organisation type: (university or research institute)

Department: (if applicable)

Address:

Telephone:

Website:

History and composition: *(include number of industry, academics, students and researchers employed or member of the organisation, 100 words max)*

Indicate scientific quality:

**Chair details**

Name:

E-mail:

Telephone number:

Employer:

Previous conference organization experience: *(include topics, highlights and number of days, sessions, participants for each event)*

**Co-chair details**

Name

E-mail

Telephone number:

Employer:

Previous conference organization experience: *(include topics, highlights and number of days, sessions, participants for each event)*

**Local Organising Committee**

Please provide the following information for each committee member that has committed to serve on the Local Organising Committee.

Name:

Affiliation:

Email:

**Proposed theme and topics**

Please provide a short introduction of the scientific programme

Conference theme:

Conference topics: (max 6)

Plenary sessions: (min 3)

Plenary speakers: (min 5)

Other highlights: (max 100 words)

**Motivation**

Please provide information on how scientific quality, expertise, experience and calibre of your organisation will contribute to the success of the EFFoST International Conference *(approx. 300 words).*

**Part II – Location and facilities**

Please contact your national tourist board, destination (city) marketing organisation and/or convention bureau as they can be a great source of information and support for your proposal.

**Proposed two Conference venues**

Venue name

Venue address:

Venue website

Space availability: *(see space requirements in Chapter 5)*

Available dates: *(3 days in the period the last week of October to third week of November)*

**Venue contact person**

Name:

Email address:

Tel:

**National support**

Has the national tourist board, destination (city) marketing organisation and/or convention bureau offered any support to bring the EFFoST Conference to their city?

Financial support/subvention: *(such as amount per delegate)*

In-kind support: *(such as covering costs of welcome reception, conference venue, travel passes for delegates, city information)*

**International accessibility**

Please provide information on the accessibility of the city and the conference venue.

Closest International airport(s):

Distance from airport to the convention venue: (*also include public transport options)*

Comments on traveling to/in the location:

**Hotels and Accommodation**

Please indicate the number and type of accommodation with 15 minutes travel of the conference venue.

|  |  |  |  |
| --- | --- | --- | --- |
| Type of Accommodation | Number of rooms | Average room rates | Walking distance (min) |
| 5 Star hotels |  |  |  |
| 4 Star hotels |  |  |  |
| 3 Star hotels |  |  |  |
| Apartment style |  |  |  |
| Budget/backpackers |  |  |  |

**Motivation**

Please provide information on how your location is unique considering the criteria mentioned above compared to other destinations and how this will contribute to the success of the EFFoST International Conference *(approx. 300 words).*

**Submitted by authorised person**

Printed Name:

Signature:

Date: