**SUBSTITUTION/ABSENTEE REQUEST FORM**

**Engineering in Medicine and Biology Conferences**

---

**Date Submitted:** 
**Conference Name:** International Symposium on Biomedical Imaging (ISBI’18)

---

**Corresponding Author Details**

<table>
<thead>
<tr>
<th>NAME:</th>
<th>PIN:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Email Address:** 

---

**Only co-authors are eligible as a substitution in the event the corresponding author is unable to attend.**

1. **Yes**, the name of my substitute is: ____________________________
   
   He/she is a confirmed registrant and is aware he/she is presenting on my behalf (PIN) __________

2. **No**, no one will present my work (signature) * ____________________________

**NOTE:**

* Unless there is a medical emergency or a Visa/travel issue, I understand that I will not be permitted to submit another paper for 2 years. **All requests will be reviewed by the committee and the author will be notified to the status of their request.** Official documentation must be sent with this form or within 5 days after the conference.

---

**Paper Details**

<table>
<thead>
<tr>
<th>Paper ID:</th>
<th>Authors:</th>
<th>Paper Title:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

**Detailed reason you are unable to attend (please attach/send official documentation with this form):**

---

**Conference Registration Information**

I have **completed** a registration payment to attend the conference.

I have **not** completed a registration payment to attend the conference.

---

If this is a Visa issue, you may be eligible for a partial refund.

---

I would like to receive a copy of the proceedings and I understand that I will not receive a refund.

I am not interested in receiving a copy of the proceedings and would like to receive a refund.

---

**Please submit this form via email to j.sandler@ieee.org**

---

**For office use only**

<table>
<thead>
<tr>
<th>Form Received on</th>
<th>Proceeding Sent</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Informed Timely</th>
<th>Registration Refunded</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action Taken</th>
<th>Contributing author paid registration</th>
</tr>
</thead>
</table>