CASE INFORMATION FORM

Please prepare this form and submit with the abstract in one file.

1. Case Title:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

2. Author(s) and Faculty Supervisor Information – No more than 4 students per case
Author(s) (Please indicate if Graduate or Undergraduate Student):

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Student Email Addresses: _________________________________________________
________________________________________________________________________
________________________________________________________________________

Faculty Supervisor: ____________________________
Institution: _______________________________________
Address of Faculty Supervisor: __________________________________________

Telephone of Faculty Supervisor: ___________ Fax: _______________________
E-Mail of Faculty Supervisor: ___________________________________________

3. Data Source for Case: Field research_______ Library_______
                           Personal Experience ______

4. Case Authorization:
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