

NGN Technical Workshop Speaker's Biography and Audio-Visual Equipment Form

*Please fill in this form and email it to the Secretariat of NGN Technical Workshop

Secretariat: Ally Kim (Ms.)

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Deadline: February 28, 2005 Speaker Details Prof.(Mr.)Ms./ First Name: Taesang Middle Name: Last Name: Choi Affiliation 1 (Dept./ Division): BcN Technology Division Affiliation 2 (Univ./ Company): **ETRI** Phone: +82428605628 ex) +Country code - Area code - Telephone number Fax: +82428605440 ex) +Country code - Area code - Fax number E-mail: choits@etri.re.kr 161 Kajong-Dong, Yusong-Gu, Daejon 305-350 Republic of Korea Address: Session VII – NGN Technology II Session Title: Flight Schedule Departure Arrival Date / Time Flight No. *Please write your biography briefly. • Educational Background Period School Major and Degree 1991 U. of Missouri-Kansas City, USA Computer Networking & **Telecommunications** 1995 U. of Missouri-Kansas City, USA Experience Period Organization Position and Duty 1996 ~ present **ETRI** Principal Engineering Staff Lwish to use the following equipment for my oral presentation LCD (Beam Projector) Slide Projector Overhead Projector **VTR** I don't use any equipment