

ISA, Department of Physics & Astronomy, Aarhus University, Ny Munkegade 120, DK-8000 Aarhus C

Supporting information for a PROPOSAL AND BEAM TIME REQUEST FOR EXPERIMENTS AT ISA January 2018 – December 2018

PROJECT TITLE			
PROJECT LEADER (To whom correspondence will be addressed)			
Name: Address:			
Address.			
Tel:	Email:		
COLLABORATORS			
Name:	Affiliation		
REQUESTED BEAM TIME *)			
SPECIFY BEAM LINE **)			
PREFERRED BEAM TIME PERIOD			
EXCLUDED DATES			

- *) Beam time will be given in a number of 24 hour days. Please note that for several installations the minimum beam time is 1 experiment week = 6½ days.
- **) Enter one of the following names: AU-CD, AU-UV, AU-SGM3, AU-MatLine, AU-AMO



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Use this form ONLY if your project is to be considered for support from the "CALIPSOplus" transnational access programme.

(To be submitted in one (1) copy)

Title of Project:				
			Supported Days	
Name of Participating Users	Nationality	Home Institution	Requested	
Project leader:				
Collaborators:				
Justification for requesting support for more than one visitor:				

Please send the completed Supporting Information Form, along with the PDF file generated on the wayforlight website as attachments to:

e-mail: karin.vittrup@phys.au.dk

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