



8th European Workshop on
Beam Diagnostic and Instrumentation
for Particle Accelerators

DIPAC 2007

FELLOWSHIP APPLICATION FORM

FULL NAME: _____

EMAIL ADDRESS: _____

HOME INSTITUTION: _____

REFERENCES: list persons (full name and e-mail) who can provide information on your qualification

Quote any laboratory/colleagues where you have been working with:

Please send this application form and CV by fax to +390409380902 to the attention of Mario Ferianis, and/or by email to mario.ferianis@elettra.trieste.it
Cc: ilde.weffort@elettra.trieste.it .

PRIVACY POLICY

Please sign the following statement:

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Date: _____

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