

APPLICATION FORM

ENEN Course on Radiation Protection and Nuclear Measurements
SCK•CEN, Mol, Club-House, 08/03 – 19/03/2005

TO SEND BACK NOT LATER THAN January 13, 2005

Please complete this form and send it to:

Ms. Ingrid Van Regenmortel, SCK•CEN, Boeretang 200, 2400 Mol, fax: +32 14 31 91 81 or ingrid.van.regenmortel@sckcen.be

PARAMETERS OF THE HOME UNIVERSITY

Please use capitals

University Name: _____	Responsible Professor's Name: _____	<input type="checkbox"/> Prof. <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.
Address: _____		
Town: _____	Zip: _____	Country: _____
Phone: _____	Fax: _____	e-mail: _____

APPLICANTS DATA

Private data

Last Name: _____	First Name: _____	<input type="checkbox"/> Prof. <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms.
Private address: _____		
Zip: _____ Town: _____	Country: _____	
Place of birth: _____	Date of birth: _____	
Passportnumber: _____	Date of Issue: _____	Valid till: _____

Professional data

Company: _____	Address: _____	
Zip: _____ Town: _____	Country: _____	
Phone: _____	Fax: _____	E-mail: _____

Hereby I apply for participation in the "Course on Radiation Protection and Nuclear Measurements (6 ECTS)" organised on a European level, in the frame of the ENEN association (www-enen-assoc.org). I accept that my application is subject of a selection procedure, and may be refused, if the course is already fully booked, or if the selection committee decides so, due to any reason. I understand that my travels to Mol (Belgium) and back, my accommodation, my insurances, and the acquisition of the necessary visa have to be arranged and paid individually if I will be selected for participation.

The followings are attached to my application:

- 1) A Curriculum Vitae (English knowledge must be stated)
- 2) A list of courses followed during the university studies. A short description of the content of the following courses: mathematics and physics.
- 3) A letter of recommendation signed by a responsible professor of the sending institute (preferably, but not necessary an ENEN participant)
- 4) A declaration stating the number of credits (ECTS) which will be acknowledged in the home university upon successful completion of the course (signed duly by a responsible professor of the home university)
- 5) A statement about the way of the coverage of the costs of my participation (own sources, home university, grant, fellowship, etc.).
- 6) Evidence of the payment of a € 500 deposit on the below account. This deposit will be refunded on the first day of the course. The deposit will not be refunded if the student does not show up or cancels its participation after the date of the deadline for application.

Cash payment (on site) Payment by credit card (via www.sckcen.be/e-terminal/extern.asp)

Full payment to the account 550-2712400-79 (IBAN BE 58 5502 7124 0079) of SCK•CEN, av. Herrmann-Debroux 40, B-1160 Brussels
Or through bank transfer to Dexia Bank, Koning Albert II laan 30b2, B-1000 Brussels (SWIFT BIC-code ARTEBEBB).
Please make sure that the payment should be made net of all bank charges and commission.

Indicate the course name: BNEN - Radiation Protection and Nuclear Measurements and date on the bank transfer.

INVOICE

Invoice required: yes (if yes, it will be sent after receipt of payment) no

Invoice Address (if not same as above)

VAT number:

ACCOMMODATION: yes (if yes, please tick as appropriate) no

I would like to book the following accommodation:

- | | |
|--|---|
| <input type="checkbox"/> Dormitories without hotel service (only sheets, no cleaning) | Price: €76,95/2 weeks (warranty of 135€) |
| <input type="checkbox"/> Dormitories with hotel service (sheets, towels, soap, daily cleaning) | Price: €263,47/2 weeks (warranty of 135€) |
| <input type="checkbox"/> Club-House hotel | Single room: €50/night (breakfast included) |

Date of arrival:

Date of departure:

I undersigned certify that I have read and accept the conditions of application, registration & reservation.

Date:

Signature: