Users Office use only:					
Application Form for RIBF ULOR Symposium					
		Date: send to:	sympo-kyoyo[at]ribf.riken.jp		
1) Scheduled Date and Pla	ace of the Symposium				
Date: Place:	(yyyy/mm/dd) ~	(yyyy/mm/dd) (Numb	er of Days: days)		
	sium, please contact "Nuclear Physics Sem verlap your application with seminars or con				
2) Title					
3) Brief Description (Free F		s, title of the symposium will be published in	n RIKEN Accelerator Progress Report.		

4) Contact Persons

All contact persons should be listed. Please add extra lines if needed.

	Name	Institute	Tel	E-mail
Primary Contact *1				
Contact Person 2				
Contact Person 3				
Contact Person at RIBF *2				
*1 It is advisable that a primary contact person is from an institution other than RIBF				

*2 If no one belongs to RIBF, please contact ULIC.

5) Request for financial support

es		Please add extra lines if needed.
Intsitute & Position	Estimated Amount	Route
A	¥	-
	A	Intsitute & Position Estimated Amount

Only travel expenses in JAPAN will be provided. Those who come from Tokyo area will not be supported.

- Lodging Expenses				Please add extra lines if needed.
Name	Intsitute & Position	Price per night Maximum: 9,980 JPY/night	Number of nights	TOTAL
				¥ -
				¥ -
				¥ -
				¥ -
TOTAL	B	¥		-

Only lodging expenses in JAPAN will be provided. Those who come from Tokyo area will not be supported.

- Refreshments (Coffee etc.)

Price / person / day		JPY	Maximum: 500 JPY / person / day
Number of expected participants		participants	Participants' list should be submitted later on.
Number of days	0	days	
TOTAL C	¥		-

Request for Financial Support ... A+B+C

¥

Maximum amount of financial support is 500,000 JPY.

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6) Co-hosting / any financial support from other organization(s)