

XX VIETNAM SCHOOL OF PHYSICS (VSOP)

Quy Nhơn, 03 – 15 August 2014

APPLICATION FOR PARTICIPATION

(Please, print legibly or use a typewriter. Uncompleted form will NOT be considered)

Section I: PERSONAL DATA (to be completed by the Applicant)

1. Surname: First name: Middle name(s):

2. Name as written in the passport or ID Card:

3. Nationality:

4. Sex Male Female

5. Date of birth (day - month – year) :.....

6. Highest Univ. degree received (Indicate area of specialization & date).

7. Academic position & Scientific employment:
.....

8. Adresses (Please, give addresses in full and tick only ONE box to indicate the address for correspondences)

Professional: Home / Private:

.....
.....
.....

Phone:..... Phone:.....

Fax:..... Fax:.....

Professional E-mail :..... Personal E-mail

9. Details of physics education (this is used by the organisers to better target the level of courses):

Please, tick the relevant items and/or add relevant elements

- | | | | |
|---------------------------------------|-------------------------------------|--------------------------------------|-------------------------------------|
| - Quantum Field Theory: | <input checked="" type="checkbox"/> | - Statistical Physics: | <input checked="" type="checkbox"/> |
| - Group Theory: | <input type="checkbox"/> | - Computer education (pls, specify): | <input checked="" type="checkbox"/> |
| - Particle Physics: | <input checked="" type="checkbox"/> | - Other fields (pls, specify below): | <input type="checkbox"/> |
| - General Relativity and Gravitation: | <input checked="" type="checkbox"/> | | |

10. Professional activities (please, use additional pages if necessary):

- Research subject:

- Teaching activities:.....

- If you have publications, please list those you consider most relevant (Title, Author(s), Year & Journal)

11. Give your motivation for attending the School:

12. English language proficiency: excellent good fair poor

13. Financial support requested from the organizers (please, tick in the appropriate box)

- No support requested

- Support for local expenses only: sharing-room meals

- Travel support (please, give the amount requested):

14. If you would like to present a seminar talk (~20 min.) or a poster, please give the following details:

- Seminar: or Poster:

- Title:.....

I certify that the statements made by me above are true and complete.

Signature of candidate : Place and date (*dd-mm-yy*):

Please attach the completed form **before 15 May 2014** (Thursday), when you register online at

<http://www.iop.vast.ac.vn/activities/vsop>

Section II: INFORMATION OF THE SENIOR SCIENTIST RECOMMENDING THE APPLICANT (*to be completed by the Applicant*)

Full Name :

Full address of Institution:

Email: Phone: Fax :

The applicant should ask the senior scientist who will recommend her/him to complete the **recommendation form given separately on the school website and submit it (via post or email or fax) to the school secretary.**

CONTACT ADDRESS:

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