PROPOSAL AND BEAM TIME REQUEST FOR EXPERIMENTS AT ISA
March 2012 – February 2013

PROJECT TITLE

IS THIS PROJECTIS A CONTINUATION OF A PREVIOUS PROJECT AT ISA? ☐

PROJECT LEADER (TO WHOM CORRESPONDANCE WILL BE ADDRESSED)

Name: **Address:** **Tel.:** **Fax:** **E-mail:**

COLLABORATORS

Name:	**Affiliation:**

REQUESTED BEAMTIME *)	
SPECIFY BEAMLINE	
PREFERRED BEAMTIME PERIOD	
EXCLUDED DATES	

*) **Beamtime should be given in number of 24 hour days. In addition, please note, that for several installations, the minimum beamtime will be 1 experiment week = 6½ days.**

Scientific motivation (½ - 1 page).

List of publications (MAXIMUM 20) and PhD theses resulting from previous work related to this project