

MEMBERSHIP APPLICATION FORM

Mathematical Science of Understanding and Predicting Regional Climate: A School and Workshop

(28 Feb - 11 Mar 2011)

This form should be completed and returned to: Institute for Mathematical Sciences, 3 Prince George's Park, Singapore 118402 or fax to: (65) 6873 8292

1. PERSONAL PARTICULARS

Title and Full Name as in Passport/Identity Card (underline Surname/Family Name): Prof / Dr / Mr / Mrs / Ms**				Designation:	
Institution Name & Address:			Telephone Nos.:		
			(Office)		(Mobile)
			(Home)	(Pager)	
			Fax No.:		
Postal Address: (if different from above address):	E-mail Address:				
	Nationality:				
	Passport No.:		Date of Issue:		
Date of Birth:	Sex*:	□ Female	Place of Issue:		Date of Expiry:
Country of Birth:					

2. ITINERARY AND ACCOMMODATION								
Date of Arrival (confirmed/tentative**):	Date of Departure (confirmed / tentative**):	Lodging Arrangement*:		No. of accompanying family				
	🗆 Yes 🔅 No			member(s):				
If lodging arrangement is required please specify your preferences. (More information on lodging is available at htt://www.ims.nus.edu.sg/vizinfo.htm)*:								
□ NUS Campus Lodging (limited availability) □ Off Campus Club House / Inn / Hotel (indicate name below)				Room Type*:				
				□ Superior	Deluxe			
				Occupancy*:				
☐ Other Requests / Comments:				☐ Single Double				
				Inclusive of breakfast*:				
				□ Yes	□ No			
If your family member(s) is to accompany you, please provide the following for each family member.:								
Name Relationship City and				Country of Birth				
1.								
2.								
3.								
4.								

3. FINANCIAL POSITION (Applicable to those applying for financial support)						
Please indicate types of financial support required from Institute*: Travel Cost Living Expenses Others (please specify) :	Have you applied or been granted financial support from other sources for your visit*:					
If you wish to apply for financial support from IMS, please provide 3 letters of recommendation to be sent by the letter writers directly to the following address:	The following individuals will submit letters of reference for my applications: Name Affiliation					
The Director	1.					
Institute for Mathematical Sciences	2.					
National University of Singapore	3.					
3 Prince George's Park						
Singapore 118402						
Republic of Singapore						

4. PUBLICATIONS

Please list your publications in chronological order on a separate sheet and attach.

5. CURRICULUM VITAE

Please attach your curriculum vitae on separate sheet.

*Please 🖾 as appropriate