NUS National University of Singapore

Institute for Mathematical Sciences

MEMBERSHIP APPLICATION FORM

Geophysical Fluid Dynamics and Scalar Transport in the Tropics

(13 Nov - 08 Dec 2006)

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**, at least 3 months before commencement of the membership.

1. TUTORIALS/WORKSHOP DETAILS

Please select all the activities that you will be attending*:

Lecture - Tutorial:

☐ Lagrangian and Hamiltonian methods in Geophysical Fluid Dynamics and Transport, **4 - 8 Dec 2006**

Workshops:

☐ Dynamical Models of the Tropical Atmosphere, **13 – 17 Nov 2006**

☐ Ocean Modeling, **27 - 28 Nov 2006**

☐ Chaotic and Turbulent Scalar Transport, **29 Nove - 1 Dec 2006**

2. PERSONAL PARTICULARS

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

3. ITINERARY AND ACCOMMODATION

Date of Arrival (confirmed/tentative**):	Date of Departure (confirmed / tentative**):	Lodging Arrangement*: ☐ Yes ☐ No	No. of accompanying family 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)*

☐ Other Requests / Comments:

Room Type*:
☐ Superior ☐ Deluxe

Occupancy*:
☐ 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.			

Please indicate ☒ as appropriate

****** Please delete as appropriate***

4. 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*:

☐ Yes ☐ No

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 Director
Institute for Mathematical Sciences
National University of Singapore
3 Prince George's Park
Singapore 118402
Republic of Singapore

The following individuals will submit letters of reference for my applications:

	Name	Affiliation
1.		
2.		
3.		

5. PUBLICATIONS

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

6. CURRICULUM VITAE

Please attach your curriculum vitae on separate sheet.

Please ☒ as appropriate

Note:

- IMS members do not need to complete any registration form for all the program activities such as conferences, workshops and tutorials.
- Fax no. is required for transmission of Employment/Dependent's Pass application form to expedite application, which can take up to 4 weeks. Employment/Dependent's Pass is necessary for periods of stay 14 days or longer.
- If you have not finalized the confirmed arrival and departure dates, please let us have them at least 2 months before your arrival to Singapore.
- Only limited on-campus accommodation is available. If you are requesting such accommodation, we need your confirmed arrival and departure dates so that we can try our best to secure a room for you.