



MEMBERSHIP APPLICATION FORM

Uncertainty and Information in Economics

(9 May - 3 July 2005)

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. PERSONAL PARTICULAR	RS								
Title and Full Name as in Passport/Identit Prof / Dr / Mr / Mrs / Ms**	ty Card <i>(und</i>	derline Surname/Family Name):			Designation:				
Institution Name & Address:			Tele	phone Nos.:					
			(Off	ice)		(Mo	bile)		
			(Ho	me)		(Pa	ger)		
			Fax	No.:					
ostal Address: (if different from above address):			E-m	E-mail Address:					
			Nati	onality:					
			Pas	sport No.:		Dat	te of Issue:		
Date of Birth:	Sex*: Place of Issue:		Dat		ate of Expiry:				
Country of Birth:		☐ Male ☐ Female							
2. ITINERARY AND ACCOM	MODATIO	ON							
Date of Arrival (confirmed/tentative**):	Date of De	eparture (confirmed / tentativ	e**):	Lodging Arra	angement*:		No. of accompan	ying family	
If lodging arrangement is required please	specify you	ur preferences.(More informati	ion on Id	odging is availab	le at htt://www.ims.nus.e	edu.sg	/vizinfo.htm)*:		
□ NUS Campus Lodging (limited availa	ability)	☐ Off Campus Clu	b Hou	se / Inn / Ho	otel (indicate name belo	w)	Room Type*:	□ Dalima	
							☐ Superior Occupancy*:	☐ Deluxe	
☐ Other Requests / Comments:							☐ Single Double		
							Inclusive of breal	dast*:	
							☐ Yes	□ No	
If your family member(s) is to accompany Name	you, pleas	se provide the following for e	ach far	mily member.:		and (Country of Birth		
1.		rtoiduorioriip			Oily !	ana c	bountry of Birth		
2.									
3.									
4.									

Please indicate 🛚 as appropriate

** Please delete as appropriate

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.
Please list your publications in chronological order on a separate sheet and at CURRICULUM VITAE	tach.

Note:

- IMS members do not need to complete any registration form for all the program activities such as conferences, workshops
- 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.