

# FIXLAB PLATFORM B – BUDAPEST NEUTRON CENTRE

Wigner Research Centre for Physics HAS, Centre for Energy Research HAS

## TRANSNATIONAL ACCESS APPLICATION FORM

To be sent to

rosta.laszlo@wigner.mta.hu by e-mail, and also a hardcopy to László Rosta Wigner RCP-HAS, 1525 Budapest, POB 49, HU

1) Project Title \_\_\_\_\_

2) Acronym (max 20 characters) \_\_\_\_\_

3) Group Leader (All correspondence concerning this proposal will be sent to the Group Leader)

Family Name		Nationality	
First Name		Birth year	
Gender (tick the appropriated item): <input type="checkbox"/> female <input type="checkbox"/> male			
Home Institution			
Legal Status of Home Institution Code <sup>1</sup>		Home Institution Country Code <sup>2</sup>	
Function / Job / Title		Position Code <sup>3</sup>	
Mailing Address			
Phone (office)		Phone (cell)	
Fax		E-mail	

<sup>1</sup> **UNI**=University, **RES**=Public Research Organisation, **SME**=Small or Medium Enterprise, **PRV**=Other and/or profit or not profit Private Organisation, **OTH**= Other Organisation

<sup>2</sup> **AL**=Albania, **AT**=Austria, **BE**=Belgium, **BG**=Bulgaria, **CH**=Switzerland, **CY**=Cyprus, **CZ**=Czech Republic, **DK**=Denmark, **EE**=Estonia, **FI**=Finland, **FR**=France, **DE**=Germany, **GR**=Greece, **HR**=Croatia, **HU**=Hungary, **IS**=Iceland, **IE**=Ireland, **IL**=Israel, **IT**=Italy, **LV**=Latvia, **LI**=Liechtenstein, **LT**=Lithuania, **LU**=Luxembourg, **MT**=Malta, **MK**=Macedonia, **ME**=Montenegro, **NL**=Netherlands, **NO**=Norway, **PL**=Poland, **PT**=Portugal, **RO**=Romania, **SK**=Slovakia, **SI**=Slovenia, **ES**=Spain, **SE**=Sweden, **SR**=Serbia, **TR**=Turkey, **GB**=United Kingdom

<sup>3</sup> **UND**=Undergraduate, **PGR**=Post graduate (student with a first University degree or equivalent), **PDOC**=Post-doc researcher, **TEC**=Technician, **EXP**=Experienced researcher (professional researcher).

**4 - Project User Group** (please, fill in all the cells for each group members)

<b>Family Name</b>	<b>First Name</b>	<b>Gender</b> M/F	<b>Birth</b> year	<b>Nationality</b>	<b>Background</b> (chemist, curator,...)	<b>Function /Job/Title</b>
Home Institution(HI)	HI Legal State <sup>(1)</sup>	HI Country <sup>(2)</sup>	Position Code <sup>(3)</sup>	e-mail address	T&S support of IPERION CH (Yes/No)	
					Y	
<b>Family Name</b>	<b>First Name</b>	<b>Gender</b> M/F	<b>Birth</b> year	<b>Nationality</b>	<b>Background</b> (chemist, curator,...)	<b>Function /Job/Title</b>
Home Institution(HI)	HI Legal State <sup>(1)</sup>	HI Country <sup>(2)</sup>	Position Code <sup>(3)</sup>	e-mail address	T&S support of IPERION CH (Yes/No)	
<b>Family Name</b>	<b>First Name</b>	<b>Gender</b> M/F	<b>Birth</b> year	<b>Nationality</b>	<b>Background</b> (chemist, curator,...)	<b>Function /Job/Title</b>
Home Institution(HI)	HI Legal State <sup>(1)</sup>	HI Country <sup>(2)</sup>	Position Code <sup>(3)</sup>	e-mail address	T&S support of IPERION CH (Yes/No)	
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Home Institution(HI)	HI Legal State <sup>(1)</sup>	HI Country <sup>(2)</sup>	Position Code <sup>(3)</sup>	e-mail address	T&S support of IPERION CH (Yes/No)	

Please add as many users as necessary, via copied extra pages

**5) Local Contact** (if any)

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**6) This is** (tick ☒ the correct item)

<input type="checkbox"/> A SINGLE FACILITY PROPOSAL addressed to BNC			
<b>In particular:</b>	<input type="checkbox"/> a new proposal	<input type="checkbox"/> a continuation	<input type="checkbox"/> a resubmission
<input type="checkbox"/> A MULTIPLE FACILITY PROPOSAL			
<b>Involving also:</b>	Platform B: <input type="checkbox"/> ATOMKI-HAS	Platform A: <input type="checkbox"/> AGLAE <input type="checkbox"/> SOLEIL	

**7) Sample**

Material	_____
Quantity	_____
Form	_____
Size	_____

**8) Access is requested for the following experimental setup(s) of interest\*** (tick ☒ the item chosen)

<input type="checkbox"/> Small Angle Neutron Scattering (SANS)	<input type="checkbox"/> Time-of-Flight Neutron Diffraction (TOF-ND)
<input type="checkbox"/> Prompt Gamma Activation Analysis (PGAA)	<input type="checkbox"/> Neutron Induced Prompt Gamma Spectroscopy with Neutron Imaging (NIPS-NORMA)
<input type="checkbox"/> Neutron and X-ray Radiography (RAD)	<input type="checkbox"/> Neutron Activation Analysis (NAA)
<input type="checkbox"/> Triple Axis Spectrometer (TAS)	<input type="checkbox"/> External milli-beam PIXE**
<input type="checkbox"/> Compact XRF spectrometers**	

\*\*Wigner RCP PIXE Lab offers “on the campus” possibility of complementary analyses and fast orienting pilot studies for successive neutron measurements.

**9) Special requirements for the sample environment**

Temperature range:	_____
Air condition / Humidity:	_____
Others:	_____

\* If necessary, do not hesitate to ask for help from the *Welcome Desk* members: **Zsolt Kasztovszky** – E-mail: [kasztovszky.zsolt@energia.mta.hu](mailto:kasztovszky.zsolt@energia.mta.hu) and **Katalin Bajnok** – E-mail: [bajnok.katalin@wigner.mta.hu](mailto:bajnok.katalin@wigner.mta.hu)

**10) Total Requested beam time**

Specify the beamtime, days and preferred period/s

Total requested beamtime (hours)	Number of days	Preferred month	Undesired month

**11) Special remarks / requirements concerning the experiment** (sample hazard, special treatments etc.)

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**12) Project description (Scientific background- Experimental methods - Results expected and impact – References)**

attached, max. 3 pages, figures and tables excluded

**13) Short curriculum of the Group Leader**

attached, max. 2 pages

**14) Main scientific field of the project** (Chemistry, Physics, Material Science, Environment, Humanities, Social sciences, Engineering and Technology, Inf. Comm. Technology, Others)

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**15) Specific discipline** (specify among the above fields; ex.: field Chemistry- discipline Conservation; field Environment-discipline Environmental effects on art materials...)

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**16) Any other EU project related to this proposal?**
☐ Yes

☐ No

If positive response, specify:

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**17) How did you hear about IPERION CH / FIXLAB?**

☐ personal contact    ☐ web page    ☐ conference    ☐ article    ☐ other (please explain)

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I accept that all the necessary actions regarding the safe transportation of samples/objects back and forth to the facility, insurance of the samples/objects, etc. are the responsibility of the users, and no associated costs can be refund within the project.

I further confirm that, I will sent a Summary Report no later than 2 months after the experiment end and the results of the proposed experiment will be published specifying that the project leading to the publication has received funding from the *Horizon 2020 – Work Programme 2014-2015 for European research infrastructures: Financial support by the Access to Research Infrastructures activity in the Horizon 2020 of the EU (IPERION CH Grant Agreement n. 654028)* is gratefully acknowledged.

**Date** .....

**Group Leader Signature**

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