

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 ¹		Home Institution Country Code ²	
Function / Job / Title		Position Code ³	
Mailing Address			
Phone (office)		Phone (cell)	
Fax		E-mail	

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

² 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

³ 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)

Family Name	First Name	Gender M/F	Birth year	Nationality	Background (chemist, curator,...)	Function /Job/Title
Home Institution(HI)	HI Legal State ⁽¹⁾	HI Country ⁽²⁾	Position Code ⁽³⁾	e-mail address	T&S support of IPERION CH (Yes/No)	
					Y	
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Please add as many users as necessary, via copied extra pages

5) Local Contact (if any)

6) This is (tick ☒ the correct item)

<input type="checkbox"/> A SINGLE FACILITY PROPOSAL addressed to BNC			
In particular:	<input type="checkbox"/> a new proposal	<input type="checkbox"/> a continuation	<input type="checkbox"/> a resubmission
<input type="checkbox"/> A MULTIPLE FACILITY PROPOSAL			
Involving also:	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 and **Katalin Bajnok** – E-mail: 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.)

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)

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

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

☐ No

If positive response, specify:

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

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

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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