

Eol Expression of Interest Personnel Exchange and training Action Younger Researchers/students Year 2013-2014

Please fill questionnaire and send it by email to roca@enea.it or directly to all involved SOPHIA organizations. In last circumstance always include indicated email as per cc. After unfruitful actions with proposed hosting organizations because of unavailability of expert/equipment in proposed period, in order to provide/propose substitute laboratories and in agreement with applicant, this Eol will be also forwarded to any other interested SOPHIA partners by circular Myndsphere mail list or targeted email/phone call.

Applicant				
Title/First/LAST Name				
Email * (mandatory)				
Phone		Mobile		
Skype				
Your tutor/* supervisor		Email*		
Your Category/Position/Organization				
Category *, **				
Position				
Organization				
Department				
Address				
Town		ZIP		Country
Legenda:				
* Your email address, your tutor/supervisor, if you have got one assigned and your category are mandatory. ** please indicate for Categories: <u>students</u> : graduate, MSc, PhD Students post doc, etc <u>Staff personnel RTD Organziations</u> : Researcher/Senior Researcher/Research Director Staff Personnel <u>Universities</u> : Full Professor/associate Professor/assistant professor/visiting professor/high-Medium school professor, etc <u>Other Professionals</u> : Architect, Economist, Process Engineer, statistician, expert-Consultant ,etc etc***				
Proposed SOPHIA organization(s)				
Short motivation for your proposed exchange /training action? (max 200 characters)				
What is your necessity? How hosting organization can be of aid to you? Why? Please detail with any useful information could be of interest				
What do you need? (max 100 characters)				
Please detail any your necessity of equipment, expertise				
Expectations for your host/training action (max 100 characters)				
What is your expectations? Which could be the fruitful output? Please detail with any motivation could be of interest for hosting partner				
Proposed period starting	from	dd/mm/yyyy		to dd/mm/yyyy
Alternative period	from	dd/mm/yyyy		dd/mm/yyyy
Do your mission cost covered by your organization				Yes/no