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|  | | FORM NO. 004  For university users not yet covered under the Collaborative Research Scheme but need support for the experiments at IOP | |
| **UGC-DAE CONSORTIUM FOR SCIENTIFIC RESEARCH**  **KOLKATA CENTRE**  Beam Time Request from University Users for Experiments at the  Institute of Physics, Bhubaneshwar | | | |
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| 1. Title of the Research Proposal | | | | | | | | | | | |
| 2. Principal Investigator | | | | | | | | | | | |
|  | Name | | | |  | | | | | | |
|  | Institute/University | | | |  | | | | | | |
|  | Address | | | |  | | | | | | |
|  | Tel, Fax, E-mail | | | |  | | | | | | |
| 3. Co-Investigators | | | | | | | | | | | |
|  | Name | | | |  | | | | | | |
|  | Institute/University | | | |  | | | | | | |
|  | Address | | | |  | | | | | | |
|  | Tel, Fax, E-mail | | | |  | | | | | | |
|  | Name | | | |  | | | | | | |
|  | Institute/University | | | |  | | | | | | |
|  | Address | | | |  | | | | | | |
|  | Tel, Fax, E-mail | | | |  | | | | | | |
| 4. How many Collaborators will be participating in the experiment | | | | | | | | | | | |
| 5. Tick the Beam Line you wish to use | | | | | | | | | | | |
| 1. RBS/Channeling/PIXE (-45 deg) 2. AMS (-15 deg) 3. Nuclear Physics (0 deg) | | | | | | | 1. Implantation (+15 deg) 2. Surface Science (+30 deg) 3. Micro PIXE (+45 deg) | | | | |
| 6. Beam Requirement | | | | | | | | | | | |
| Ion Species | |  | | Energy | |  | Current |  | | Charge State |  |
| 7. | Research Proposal (please submit the description under following sections) :   1. Title of the Experiment 2. Brief aim of the Experiment 3. Scientific Justification 4. Experimental Methodology 5. No. of shifts of beam time needed (one shift = 8 hours) with the justification 6. List of recent references related to the research proposed | | | | | | | | | | |
| 9. | Justification for choosing the Pelletron Facility at IOP  (Attach a separate sheet; Write up should not be more than 1/2 page) | | | | | | | | | | |
| 10. | Have you used the IOP Pelletron facility before: YES/NO | | | | | | | | | | |
|  | If YES, please mention the dates and give the following information: | | | | | | | | | | |
|  | i. Progress of earlier projects at IOP (Use separate sheet)  ii. Publications using IOP pelletron (Use separate sheet) | | | | | | | | | | |
|  |  | | | | | | | | | | |
| 11. | Travel and Stay at IOP Financial Assistance for travel and stay required: YES/NO  (the travel support is limited to AC 2 tier depending upon the eligibility) | | | | | | | | | | |
|  | No | | Name | | Designation/ Affiliation | | | | Accommodation needed  (give period of stay) | | |
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| 12. | Whether you need to make use of facilities at UGC-DAE CSR, Kolkata Centre: Yes/No  If yes, please briefly mention the work to be done using the UGC-DAE CSR, KC facilities and please contact us in case a visit to UGC-DAE CSR, Kolkata Centre is needed.  (see the annexure I : List of Facilities available at UGC-DAE CSR, KC) | | | | | | | | | | |
| 13. | **Collaborators from UGC-DAE CSR, KC, if any** | | | | | | | | | | |
| Signature of Principal Investigator | | | | | | | | | | | |
| Please mail the duly completed form to :  Dr. M. Sudarshan  **UGC-DAE CSR, Kolkata Centre**, III/LB-8, Bidhan Nagar, Kolkata 700 098  Tel: 91-33-3356541/ 3358035 /3351866; Fax: 91-33-3357008/6543; e-mail: [sude@alpha.iuc.res.in](mailto:sude@alpha.iuc.res.in)  You may also contact Dr A Saha, Centre Director, **UGC-DAE CSR, Kolkata Centre** ([abhijit@alpha..iuc.res.in](mailto:abhijit@alpha..iuc.res.in)) in case of any clarifications or any specific help. | | | | | | | | | | | |