

Application for ICHMT Grant

To be submitted not later than 15 June 2009

to Dr. D. Borello, by E-mail thmt-09@thmt-09.org, or Fax: +39 06 488 1759

| | |
|--------------|--|
| Name: | |
| Affiliation: | |
| Address: | |
| Country: | |
| Phone/Fax | |
| E-Mail: | |

Why would you benefit from attendance at this symposium? _____

Have you submitted a paper to this symposium? Yes No

If Yes, has it been accepted? Oral Poster

Estimate of total cost of participation (please convert to €):

Registration fee: _____ €

Hotel accommodation / name of hotel: _____ : _____ €

Travel costs(explain): _____
_____ : _____ €

TOTAL: _____ : _____ €

IMPORTANT: Please arrange for a statement to be supplied by a senior officer of your institution to confirm that funds are not available from your institution or from any other source to support the complete costs of attendance. This statement should indicate the extent to which funds will be available from such sources. It must be sent separately from this application by the officer of the institution. It should be sent by fax or airmail, on institution letterhead, directly to:

*Dr. D. Borello / THMT-09 SECRETARIAT
Dept. of Mechanics and Aeronautics
"Sapienza" University of Rome
Via Eudossiana 18
00184 Rome, Italy*

*Tel.: +39 06 4458 5233
Fax: +39 06 488 1759
E-Mail: thmt-09@thmt-09.org*