*Attachment 1*

***CONFERENCE APPLICATION***

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| --- | --- |
| **Last name** |  |
| **First name** |  |
| **Patronymic** |  |
| **Date of birth** |  |
| **Place of birth** |  |
| **Passport**  (number, date of issue, authority) |  |
| **Address**  *(including zip code)* |  |
| **Affiliation**  *(full and short reference, address)* |  |
| **Position** |  |
| **Academic degree** |  |
| **Date of last visit to Sarov** | Year \_\_\_\_\_\_\_\_ |
| **E-mail** |  |
| **Phone numbers** | Office  Mobile |
| **Fax** |  |
| **Form of participation**  *(please tick as appropriate)* | □ - speaker  □ - listener |
| **Paper title(s), authors** |  |

Please complete the Conference Application Form for each conference participant and submit it by email ([YuMBelugina@vniief.ru](mailto:YuMBelugina@vniief.ru) and [NVVinogradova@vniief.ru](mailto:NVVinogradova@vniief.ru)) before **January 27, 2020.**