

First International Workshop on Climate Variability over Africa

15 - 26 May 2005
Alexandria, Egypt

GUIDELINES FOR REQUESTING PARTICIPATION

GENERAL

- The Workshop is mainly intended for young researchers and PhD students working in the areas of Atmospheric Physics and Dynamics, Climatology and Oceanography from countries in Africa that are members of the United Nations, UNESCO or IAEA.
- Participants must have an adequate working knowledge of English.
- There is no registration fee to be paid.
- The Request for Participation form and information on the Workshop is available at: <http://agenda.ictp.trieste.it/smr.php?1689>

PARTICULAR INFO.

- **The number of participants will be strictly limited to no more than 40.**

FINANCIAL SUPPORT

- May be requested only by candidates who are nationals of, and working in, an African country, and who are not more than 45 years old.
- Limited funds are available for a few participants, to be selected by the Organizers, and who accept to attend the entire activity.

REQUEST FOR PARTICIPATION

The **Application Form** should be completed and submitted by e-mail, fax, or post **before 20 February 2005** to:

Workshop on Climate Variability over Africa
smr 1689 (c/o P. Pieri)
the Abdus Salam International Centre for Theoretical Physics
Strada Costiera 11, 34014 Trieste, Italy

Tel: +39-040-2240374

Fax: +39-040-2240449

E-mail: smr1689@ictp.trieste.it

ICTP Home Page: <http://www.ictp.it>

REQUEST FOR PARTICIPATION

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15 - 26 May 2005 Alexandria, Egypt**

To be completed and sent to:
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the Abdus Salam ICTP
Strada Costiera 11, 34014 Trieste, Italy

Please attach a recent
photograph here.

Tel. +39 040 2240374 / Fax +39 040 2240449 / E-mail: smr1689@ictp.trieste.it

TO ARRIVE NO LATER THAN 20 FEBRUARY 2005

SURNAME/FAMILY Name: MAIDEN Name: First name: Middle name(s): Sex:
For women only (if applicable)

Please also indicate SURNAME, NAME as shown on passport (if different from above)

Place of birth (*City and Country*): Present nationality: Date of birth: *Day/Month/Year*

Full name/address of permanent Institution: Institute: Tel. No.
Telefax
Your Office: Tel. No.
Telefax
E-mail: *

Full name/address of present Institution : Institute: Tel. No.
(only if different from permanent) Telefax
Your Office: Tel. No.
Telefax:
E-mail: *

until: Date _____

Mailing address - please indicate one: Permanent institute Present institute

ALL APPLICANTS SHOULD ATTACH A CURRICULUM VITAE (max 2 pages) including education, a list of latest scientific publications, and computer knowledge (Fortran especially).

Please provide a keyword description of your current scientific activities as follows:

1) Area of research: _____
(no more than 50 characters)

2) Specific topic of interest: _____
(no more than 50 characters)

APPLICABLE ONLY TO CANDIDATES FROM, AND WORKING IN, DEVELOPING COUNTRIES

Important: Owing to limited funds, support for travel will be granted only in exceptional cases. Therefore, every effort should be made by applicants to secure support for their fare (or at least a partial contribution) from their home country.

Request for Financial Assistance: (please tick one only)

- Full Travel + Subsistence Subsistence only
 Half Travel + Subsistence No financial support requested

I certify that if granted funds for my travel, I shall attend the whole activity _____
Signature

* I agree that my e-mail address(es) may be made public on the ICTP website: YES / NO