**SA BIOPHYSICS INITIATIVE**

**AOIM2013 - SPRING SCHOOL REGISTRATION FEE**

 **SUPPORT APPLICATION FORM**

**Applicant Personal Details**

|  |  |
| --- | --- |
| Title: |  |
| Name: |  |
| Surname: |  |
| Institution: |  |
| Department: |  |
| Email: |  |
| Phone: |  |
| Cell Number: |  |

**JUSTIFICATION -** Please explain briefly and justify why you must be supported to participate in the AOIM2013 spring school:

|  |
| --- |
|  |

**Students – For student applicants the Supervisor or HoD must sign the application form**

Supervisor / HoD Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DEADLINE FOR APPLICATION: Applications must be received not later than 30 APRIL 2013**

**Email to:** **aoim2013@saip.org.za**