

**National Workshop on X-ray  
Photoelectron Spectroscopy (XPS)**

**7-8 November, 2017**

**Organized by**

**National Centre for Physics, Islamabad**



**Application Form**

**Title:**  Dr.  Mr.  Ms.

**Full Name:** \_\_\_\_\_

**CNIC #:** \_\_\_\_\_

**Academic Qualification** \_\_\_\_\_ **Position at Institute** \_\_\_\_\_

**Address of Organization/University:** \_\_\_\_\_

**Contact No:** Cell: \_\_\_\_\_ Landline (with area code) \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**XPS relevance:** *(Please Tick the appropriate)*

User

Potential User

None

**Briefly describe your relevance to this activity (Essential)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Title of Talk/Poster (If interested):** \_\_\_\_\_

\_\_\_\_\_

**Accommodation Required:**  Yes

No

**Date:** \_\_\_\_\_

Email the filled application form to  
[muhammad.arshad@ncp.edu.pk](mailto:muhammad.arshad@ncp.edu.pk) before  
**October 7, 2017**

\_\_\_\_\_  
**Signature of Applicant**