









COSPAR Capacity Building Workshop "Coronal and Interplanetary Shocks: Data Analysis from SOHO, STEREO, SDO, Wind, and Ground-based Radio Data"

Samarkand State University, Uzbekistan

August 19 - 30, 2024

Registration Form

Secretariat use only	′
Reg. nº.:	_

Please provide information as you wish it to appear on your badge and in the list of participants. One copy of this **Registration form** should be completed for each active participant. Please type or print in block letters and return by mail to the selection committee: nat.gopalswamy@nasa.gov, zmirtoshev@gmail.com

- (a) **TWO** letter of recommendation: e.g. from your supervisor, head of department or a professional astronomer who knows your work well, and
- (b) Short (1-page) curriculum vitae. If applicable, indicate here your experience using astronomical analysis software and programming languages; a one-page account of the way that attendance at this workshop would benefit your future research, together with a proposal for a project that you would like to undertake during the workshop.
- (c) For postdocs and young staff, please attach a list of publications. In case you are student and have published, you should also provide this list

The letters of recommendation should address your suitability for the workshop, the facilities which will be available to you when you return home, and your fluency in the English language, and should be sent directly to us by your referee, preferably by email to the address indicated above. You can download this form in Word format and your submissions should preferably be sent by email in PDF or Word format with the subject "COSPAR Capacity Building 2024"

There is no registration fee for scientific attendance at the workshop but participants will be accepted by the Organizing Committee mainly on the basis of their qualifications and the likely benefit to their research from participation. Please note that both (a) and (c) will be taken into account by the Organizing Committee in selecting participants, and no one can be accepted without them.











Title: () Prof.	() Dr. ()	Mr. () Mrs.	() Ms.	
Current position:	() Undergraduate student () Researcher	() Postgraduate	student () Post-doc
Family Name:		Given Name:_	 	
Gender:	Birth da	te:		
Organization:				
Address:				
	Postal Code:			
Telephone: ()	·····	Facsimile: (_)	
E-mail:				
	vorking language for the cour			
Knowledge and familia	arity with Python programming	: () none () basic	() average	() high
Dates of arriving				
Dates of leaving				
Do you wish to apply f	or financial support to attend?	() Yes	() No	
If Yes, you will need to	ofill in the Application for Su	pport and send it with	this Registrati	on form.