

BEAM TIME REQUEST

at the CCB proton beam

Institution / The name of the experiment:				
Name / Number of the project:				
Aim and brief description of the experiment:				
7 and one description of the experiment.				
Spokesperson: Institution:	Phone			
Address:	E-mail			
Experiment requirements Is it necessary to modify the beam line or the bear	n delivery method? If so, please provide a short			
Is it necessary to modify the beam line or the beam delivery method? If so, please provide a short description of the required parameters.				
Required parameters of the proton beam Proton energy (MeV):				
Fluence (p/cm²) or dose (Gy): Maximum fluence rate (p/cm²/s):				
Irradiation geometry (please provide a brief description):				
Dimensions of radiation field: width, height, range in water (mm):				
Beam direction (horizontal / vertical / required angle):				
The method of holding samples during irradiation:				

Irradiation setup and necessary accessories (Who will provide / prepare accessories for the setup):						
List of required information and data recorded durin pressure, etc.):	g irradiation (e.g. t	time, pre	essure, h	umidity,		
Consumables needed to carry out and documentation disposable items):	n of the experime	nt (eg g	afchrom	ic films, other		
Special conditions for handling the irradiated materia required during storage, etc.):	al (e.g., store witho	out acce	ss to ligh	nt, humidity		
The expected duration of the experiment:	Beam time (hours):					
Proposed date of the experiment (with a minimum of two weeks in advance):	Set-up time (ho	urs):				
The number of people participating in the experiment:						
Remarks, special conditions, needed support etc.						
People involved or present during the irradiation / ex	periment	NI				
Name. Surname ID or passport e-mail, Phone, to number Radiation Passport Number	ber		No contraindications to work with radiation (approval to work in conditions of exposure to ionizing radiation by a licensed physician and signing the certificate form)			
		□ ує	es	□ no		
		□ ує	es	□ no		
		□ ує	es	□ no		
		□ ує	es	□ no		
		□ ує	es	□ no		
		□ ye	es	□ no		

Is the equipment used during the experiment insured?
If it is necessary to send irradiated material from the CCB to the participant, please provide:
Shipping method (courier / regular post / etc.):
who covers the shipping cost
way of securing the material in the package
Participation of people participating in the experiment from the CCB in publications (Yes / No)

Conditions for participation in the experiment

- 1. Providing a completed and complete "BEAM TIME REQUEST" form at least two weeks before the agreed date of irradiation.
- 2. Indication of one contact person with whom all details of the experiment can be determined
- 3. Proper protection of the irradiated material (eg against spillage).
- 4. Unambiguous and unique identification of each sample.
- 5. Earlier sending a list of equipment that will be provided by the IFJ PAN.

Date,	Signature