**Instructions**

* Enter the information listed below. For YES/NO questions, delete as required
* Please do not scan these forms.
* Rename the form to ‘LASTNAME YYYY\_DGfI EOI’ and submit in pdf format as per website instructions.

**Personal Details**

Name:

E-mail:

## **ASI Membership**

|  |  |  |
| --- | --- | --- |
| ASI Membership Number (if known) |  | |
| Were you a full (not interim) ASI member last year? | YES | NO |
| Are you a full ASI member as of April 1st this year? | YES | NO |

**Current Position**

Current Organisation / Department:

Current Position (eg: postdoc, group leader):

**Collaboration with DGfI members in Germany**

Please outline your existing or planned collaboration with DGfi members in Germany (max 150 words)

**Career advancement**

Please outline what you expect to gain from attendance at the workshop (max 150 words)

**Research summary and presentation title / topic**

Please provide a summary of your research interest, and provide a potential title / topic of a presentation (max 150 words)

**Biographical Sketch**

(max 1 page)