## **Confirmation of NFFA access at DESY**

NFFA Project Leader	:	NFF	A Proposal ID:	
Institution/Company:		Cou	try:	
Allocated beamtime	at beamline:			
Date Start:	Date End:	No. of shifts:	Beamline:	
Allocated DESY Nand	al ab access:	·		
Date Start:	Date End:	No. of shifts:	Instrument(s):	
Participating experir	nentalists (users):			
Stay at beamline				
Name user:		Date beamtime start : Date	e beamtime end:	
1)				

## Stay at DESY NanoLab

Name user:	Date start access :	Date end access:
1)		
2)		

## Additional services provided by DESY NanoLab personnel

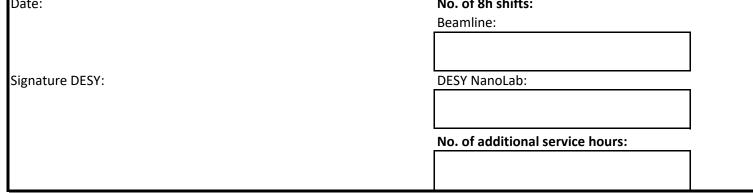
Date	No. of service hours
	Date

## The above data are confirmed as correct

Date:	Signature NFFA Project Leader:		

DESY:

	DESY Proposal ID	
The above data are confirmed as correct		
Data	No. of the shifts:	



Please enclose to your travel reimbursement forms and send to:

DESY Photon Science User Office, Notkestr. 85, 22603 Hamburg, Germany