

**[Nature of Visit]****Administrative Year  
of your visit to  
KEK(\*)**

2019

**Primary purpose of  
visit to KEK(\*)**

Tsukuba/Others

**Details 1(\*)**

Conferences, Workshops, Seminars, IPNS Theory Center

**Details 2(\*)**

KEK-PH 2020

In the [Details 2] field please provide further relevant information relating to your visit e.g. Proposal/Experiment No., Conference or Meeting name and/or the name of your contact person or division in KEK.

**Period of Stay(\*)**

2020

(year)

02

(month)

18

(day) -

2020

(year)

02

(month)

21

(day)

**Contact Section  
within KEK**

IPNS(Theory)

**Contact Person  
within KEK**

Tomoko Numata

**KEK Contact Phone  
No.**

5393

(extension No. if you know)

Please note that for some identified activities, entries in the following fields are not required.  
In these cases the fields will be inactive.

**During your time at KEK do you intend to enter a Radiation Controlled Area or work with/handle radioactive materials?(\*)** Yes  No**Project  
Spokesperson  
Name(\*)**

Mihoko Nojiri

**Project  
Spokesperson  
Affiliation(\*)**

IPNS Theory Center

**Project  
Spokesperson  
Position(\*)**

Professor

**Area to be  
Accessed(\*)**

Others

Other( Others )

**[Fill in (Name of KEK Host ) if you plan to stay at KEK apartment]**

Name of KEK Host

**[Application](\*)** A report of user's registration and a written consent A report of user's registration

Please check if there is anything wrong. Then, click "Continue".  
You can check them again on the next page.