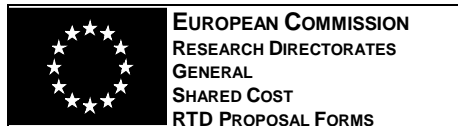


Shared Cost RTD Proposal Form – Form A3



EN D 2 FP5RTD

FOR COMMISSION USE ONLY

Proposal Acronym ⁵	Proposal No ⁶
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A3. Participant Profile/Information (1 form per participant) ²³**Legal information on the participating organisation**

Participant Role ²⁴	AC	Participant No ²⁵	0	Assistant to Contractor No ²⁶	
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Registration No with the European Commission's Research Programmes ²⁷	
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Organisation Legal Name ²⁸	Southern Ural State University
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Short Name ²⁹	susu	Legal Registration No ³⁰	0336Ser.UP-TSA
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Activity Type ³¹	HES	Legal Status ³²	GOV	If 'PRC', Specify ³³	
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Business Area ³⁴ (NACE)	80	User/Supplier ³⁵ (U/S)	U	Cost Basis ³⁶ (FC / FF / AC)	
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Organisation details ³⁷

Annual turnover ³⁸	T1	Annual Balance Sheet Total ³⁹	B1	Number of employees ⁴⁰	S6
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Is Your Organisation independent ⁴¹ ?	Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>
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If No, please indicate legal name(s) of owner(s) who own 25 % or more ⁴²	

Is Your Organisation affiliated to any other participant(s) in the proposal ⁴³ ?	Y	<input type="checkbox"/>	N	<input checked="" type="checkbox"/>
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If Yes, please indicate Participant No, Short Name(s) and character of affiliations(s) (D / I) ⁴⁴		I
		I
		I

Address of the main department carrying out the work ⁴⁵

Department/ Institute Name ¹⁰	Division of Wan Technologies / Region Centre of Freenet		
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PO Box ¹¹	
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Street Name and Number	Lenin Prospekt 76
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Post Code ¹²	454080	Cedex ¹³	
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Town/City	Chelyabinsk
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Country Code ¹⁴	UA	Country Name ¹⁴	Ukraine
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Authorised person ⁴⁶

Title (Dr, Prof., ...)	Dr.	Gender ⁸	F	<input type="checkbox"/>	M	<input checked="" type="checkbox"/>
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Family Name	Latukhin
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First Name	Dmitry
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Telephone No ¹⁵	(7-351)2654992	Fax No ¹⁵	(7-351)2347408
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E-mail	DL@URC.AC.RU
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I certify that the above information is accurate and that my organisation has agreed to participate in this proposal.

Date (DD/MM/YYYY)	11/04/2000
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Signature of authorised person	
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