Received: . . . Proposal No. 20A -

# Application Form for Seimei 3.8-m Telescope (Cover Sheet)

Category NC: Normal (Classical) NT: ToO / ( N: New C: Cont.) Date: Y M D

**1. Title:**

 **2. Principal Investigator:**  ( ) **Thesis:**

 **3. Institution**: **Present Position:**

 **4. Address**: Country:

 Phone: Fax: E-mail:

|  |  |  |  |
| --- | --- | --- | --- |
| **5. Collaborators** *(Family, First Name)* | Institution | Country | Present Position |
|  |  |  |  |

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| --- |
| **6. Past Observations** *(within the Last Three Years)*: |
| Year(A/B) | P.I. Name | # of nights | Success Rate | Status/Publications |
|  |  |  |  |  |
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| **7. List of Related Publications** *(Up to 5 Papers): (Authors, Title, Journal, Vol., First Page, Year)* |
|  1. |
|  2. |
|  3. |
|  4. |
|  5. |

**\*8. Supervisor**: Institute / Position:

Phone: Fax: E-mail:

 \*Required in case the PI is a graduate student.

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| **1. Title:** |
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|  |
| --- |
|  Abstract |
|  |

1 Solar System 2 Stars 3 Star Formation 4 Exoplanets 5 Interstellar 6 Galactic

### Scientific Category:

7 Extragalactic 8 Instrument Development 9 Other( )

1. **Instrument: 1** 1 KOOLS-IFU
2. **List of Targets** *(Use an additional sheet if this space is not suﬃcient)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Target Name | RA | Dec | Equinox | Mag.(Band), Sp. Type |
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| --- | --- | --- | --- | --- | --- |
|  | ( |  | nights× |  | times ) |

1. **Total Nights Requested in This Cycle:**
2. **Preferred Dates:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Jan | Feb | Mar | Apr | May | Jun |
| 1st Priority | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | U |
| 2nd Priority | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | U |
| 3rd Priority | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | - | U |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes / |  | No |

 **Accept Time-shared Observations?**

|  |
| --- |
|  Experiences: |
|  |

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| --- |
| 1. **Requests Concerning Scheduling (Including Moon Phases):**
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| 1. **Requests Concerning Instruments:**
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|  Technical Description: |
| *(Please describe clearly the technical feasibility (on observations and data analyses) of your proposed plan. Also specify how much S/N ratio is required for achievement of the scientific goals and justify the requested observing time with realistic considerations of overheads.)* |