## Measurement-Time Request



Date of	f request:	——— JOYCE
		http://joyce.cloud
Name:		
Affiliat	ion:	
Addres	s, City:	
Countr	y:	
Phone:		
E-mail:		
For wh	ich instrument(s) do you	request measurement time with specific operating strategies?
	BoXPol	
	JuXPol	
	JOYRAD-35	
	JOYRAD-10	
	JOYRAD-94	
	HATPRO	
	MRR (please specify)	
	Doppler Lidar	
	Other instruments	
	(please specify)	
Ten	nporal extent: from	to
Inte	ended use:	
	Thesis (Bachelor, Mast	er, PhD)
	Scientific Project	
	Campaign	(Name of project and project leader)
		(Name and organization of campaign)
	Other:	(Description of other use)

Beside this sheet, please hand in a project description (at least 600 words), where you describe the aim of your use of JOYCE-CF instruments and the specific operating or scanning strategies!

Would you like to request extra measurement time or space for an own instrument installation as well?

□ Yes

□ No

Please send this request form to info@joyce.cloud

(Please order with specific request sheet)?