



APPLICATION FORM

ONE-MONTH RESEARCH GRANT AT THE UNIVERSITY OF VIENNA WITHIN THE PARTNERSHIP

PERSONAL DATA OF THE APPLICANT

SURNAME:

FIRST NAME:

SEX: MALE FEMALE

DATE OF BIRTH:

NATIONALITY:

PRIVATE ADDRESS/HOME ADDRESS:

TEL.NR.: , E-MAIL-ADDRESS:

SOCIAL INSURANCE NUMBER:

DEGREE AND SPECIALIZATION:

FACULTY AND DEPARTMENT AT THE HOME UNIVERSITY:

ACADEMIC ADVISOR AT THE HOME UNIVERSITY

FIRST NAME AND SURNAME INCL. ACADEMIC DEGREE:

DEPARTMENT:

E-MAIL-ADDRESS:

ACADEMIC ADVISOR AT THE UNIVERSITY OF VIENNA

FIRST NAME AND SURNAME INCL. ACADEMIC DEGREE:

DEPARTMENT:

E-MAIL-ADDRESS:

RESEARCH TOPIC/PROJECT FOR THE STAY AT THE UNIVERSITY OF VIENNA

TITLE:

ABSTRACT OF ABOUT 100 WORDS:

PLANNED STAY IN 2019 (AGREED WITH THE ACADEMIC ADVISOR AT THE UNIVERSITY OF VIENNA)

FROM – TILL:

DOCUMENTS TO BE ATTACHED

CV (CURRICULUM VITAE)

LIST OF PUBLICATIONS (IF EXISTENT)

DETAILED DESCRIPTION OF THE RESEARCH PROJECT AND THE REASON FOR THE STAY AT THE UNIVERSITY OF VIENNA

SHORT BIBLIOGRAPHY RELATED TO THE RESEARCH TOPIC

LETTER OF RECOMMENDATION OF A SCIENTIST AT THE APPLICANT'S HOME UNIVERSITY

ACCEPTANCE LETTER OF AN ACADEMIC ADVISER AT THE UNIVERSITY OF VIENNA