**APPLICATION FOR GGS TRAVEL GRANT**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Last name and first names: | | |  | | | | | | | | |
|  |  |  |  | |  | |  | |  |  |  |
| Date of birth: | |  |  | | | | | | | | |
|  |  |  |  | |  | |  | |  |  |  |
| Address: |  |  |  | | | | | | | | |
|  |  |  |  | |  | |  | |  |  |  |
| Telephone at work: | |  |  | | | | | | | | |
|  |  |  |  | |  | |  | |  |  |  |
| E-mail: |  |  |  | | | | | | | | |
|  |  |  |  | |  | |  | |  |  |  |
| Institution and department: | | |  | | | | | | | | |
|  |  |  |  | |  | |  | |  |  |  |
| GGS group leader: | |  |  | |  | |  | |  |  |  |
|  |  |  |  | |  | |  | |  |  |  |
| Course/meeting/congress/laboratory visit/etc which you plan to attend  (name, place, date, web page) | | | | | | | | | | |  |
|  |  |  |  | |  | |  | |  |  |  |
|  | | | | | | | | | | | |
|
|
|  |  |  |  | |  | |  |  | |  |  |
| Participation (include abstract and letter of acceptance for oral presentation or poster): | | | | | | |  | Oral presentation: | | |  |
|  | Poster: | | |  |
|  | Other: | | |  |
|  |  |  |  | |  | |  |  | |  |  |
| Expenses: | |  |  | | Tickets: | |  |  | |  | € |
|  |  |  |  | | Accommodation: | | |  | |  | € |
|  |  |  |  | | Registration/course fee: | | |  | |  | € |
|  |  |  |  | | Other expenses: | | |  | |  | € |
|  |  |  |  | | TOTAL: | |  |  | |  | € |
|  |  |  |  | |  | |  |  | |  |  |
| Travel plans (travelling route, hotels, dates): | | | | | | |  |  | |  |  |
|  |  |  |  | |  | |  |  | |  |  |
|  | | | | | | | | | | | |
|
|
|  |  |  |  | |  | |  | |  |  |  |
| Have you applied or received other grants for this trip? | | | | | | | | |  |  |  |
|  |  |  |  | |  | |  | |  |  |  |
|  | Yes (specify): |  | | | | | | | | | |
|  | No: |  | |  |  | |  | |  |  |  |
|  |  |  | |  |  | |  | |  |  |  |
| Participated GGS courses and symposia: | | | | | | | | | |  |  |
|  |  |  |  | |  | |  | |  |  |  |
|  | | | | | | | | | | | |
|
|
|  |  |  |  | |  | |  | |  |  |  |
|  |  |  |  | |  | |  | |  |  |  |
| **Date and signature:** | |  |  | |  | |  | |  |  |  |
|  |  |  |  | |  | |  | |  |  |  |
| Supervisors statement: | | |  | |  | |  | |  |  |  |
|  |  |  |  | |  | |  | |  |  |  |
|  | | | | | | | | | | | |
|
|
| **Date and signature of supervisor:** | |  |  | |  | |  | |  |  |  |
|  |  |  |  | |  | |  | |  |  |  |
| **Decision** |  |  |  | |  | |  | |  |  |  |
|  |  |  |  | |  | |  | |  |  |  |
| Application approved: | | |  | |  |  | | | € |  |  |
|  |  |  |  | |  | |  | |  |  |  |
|  |  |  |  | |  | |  | |  |  |  |
| Date, director´s signature and name in print | | | | | | |  | |  |  |  |