

Application form of the Herzog-Ernst-Scholarship Programme

Framework data

Doctoral Scholarship Postdoctoral Scholarship Family Allowance

Subject

Specification

Application period (YY.MM.DD-YY.MM.DD)

Number of months

Personal data

Surname

Forename(s)

Date of birth (YY.MM.DD)

Present employment

Academic degree

Institution in which you work or who supports your research project

University / Institution

Supervisor

Institute

Street, P.O. Box

Tel.

Fax

Post Code

City

Country

E-mail

Names of the project evaluators

Name

University

Name

University

Home address

Street, P.O. Box

Tel.

Fax

Post Code

City

Country

E-mail

Are you currently applying for scholarships at other institutions?

No

Yes

If yes, at which institution? _____

How did you hear about our scholarship?

Previous study and research visits to libraries abroad of at least one month and previous scholarships in general

Period (MM.YY – MM.YY)	Institution	City	Country	Financed by

Details of the research project

Working title of the research project

Key terms (up to three) to define your specific research topic

Short textual formulation (max 1200 characters) of the planned research project (please attach detailed presentation separately):

I hereby declare that this information is correct and complete and that I am in a position to carry out the planned research project.

I agree that my personal data required for the application and support of the Ernst-Abbe-Foundation will be stored and, in the case of funding, the name, subject area, home address, institution, funding period and key terms will be published in lists.

_____ Date

_____ handwritten signature

_____ or digital signature