

## FUBright Mobility Allowances for Research Stays

Please fill in the form completely, have it signed by your supervisor and sign it yourself.  
Then scan it and send it together with your application dossier in one PDF-document by e-mail.

### I. Personal Information

Name:  First name:   
Phone:  E-mail:   
Nationality:  Sex:  Female  Male  
Date of Birth

### II. Dissertation

Main advisor of dissertation:

Title of dissertation:

### III. Institutional Affiliation

Date of acceptance (Zulassung) to doctoral studies:

Date of enrollment:

Department:

Academic Unit / Institute

(Please enter here the name of the academic unit / institute you are affiliated with. Example: Biochemistry, Comparative Literature, Institute of Animal Nutrition, Public Law, etc.)

I am member of a DRS-program:

no

yes, of the following program:

IV. Funding for Doctorate

I hold a working contract with Freie Universität Berlin: yes no

I am grantee of:

If you chose "other" please name funding organization:

V. Hosting Institution

Name of host:

Kind of institution:

Contact details of host (postal address, phone, e-mail, name of contact person, e.g. your mentor):

City of research stay:

Country of research stay:

Intended start of stay:

Intended end of stay:

VI. Declaration of Applicant

All information provided in this application is complete and correct. I am aware that false information can lead to a withdrawal of the grant.

I agree that information provided in this application may be stored by DRS and given to the funding agency for evaluation purposes.

VII. Signatures

Both signatories assert that no other sources of funding will be used to finance the travel and/or stay.

Applicant

Main advisor at Freie Universität Berlin

Date:
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Date:
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