

Application

“KIT Research Alumni Reunion Grant”

1. Application for a

Research Stay

Monthly scholarship of up to 1500€ for up to two months

2. Research Alumnus/Alumna information

Last name

First name(s)

E-Mail

Research Alumnus/a is a member of „KIT Research Alumni Network“

Research Alumnus/a is not yet a member. I am aware that my application cannot be considered until I will have submitted my membership application.

3. Contact details

Last name

First name(s)

Academic titles / degrees

Current research position

Nationality

Date of birth

Office address at home institution:

Name of home institution

Department

Institute / Working group / etc.

Street or PO Box

ZIP Code

City

Country	
Telephone	
E-Mail	
4. Research stay information	
Planned dates for research stay	
Desired duration of research stay (applies only for <i>Research Stay</i> applications)	
1 month/Monat	2 months/Monate
5. Please describe the proposed research project you wish to undertake during your stay at KIT (200-400 words)	
6. Checklist of application documents (please make sure to submit the following with your application)	
	Applicant's CV
	Host's letter of support with short outline of research plan (informal letter with signature by prospective host). Letter of support will be sent by host directly to the International Scholars & Welcome Office.
	If the Research Alumnus/a is not yet a member of <i>KIT Research Alumni Network</i> : <i>KIT Research Alumni Network</i> Membership application (please use the form " <i>KIT Research Alumni Network</i> membership application" from our webpage)
7. Declaration of consent	

Data privacy: I consent to the storage of my personal data according to the General Data Protection Regulation (GDPR) and the Data Protection Act of the State of Baden-Württemberg (LDSG-BW) and the State University Act (LHG §2 + §12) and to the respective data being forwarded to my designated faculty (please cross out, if you disagree). I also consent to be contacted by IScO providing information about events and social activities and for quality assurance surveys.

City, Date	Applicant's Signature
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Please submit the signed application form either as a scan attached to an e-mail or fax it.

E-Mail: researchalumni@intl.kit.edu

Fax: [+49 721 608-45326](tel:+4972160845326)