

## Application

### ***“KIT Research Alumni Reunion Grant”***

#### 1. Application for a

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##### **Short Visit**

Travel allowance for short-term visits of up to two weeks

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##### **Research Stay**

Travel allowance and monthly grant for up to three months

#### 2. Research Alumnus/Alumna information

Last name

First name(s)

E-Mail

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

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

#### 3. Contact details

Last name

First name(s)

Academic titles / degrees

Current research position

☐ PostDoc

☐ Professor

Nationality

Date of birth

#### Office address at home institution

Name of home institution

Department

Institute / Working group / etc.

Street or PO Box	<input type="text"/>
ZIP Code	<input type="text"/>
City	<input type="text"/>
Country	<input type="text"/>
Telephone	<input type="text"/>
E-Mail	<input type="text"/>

#### 4. Research stay information

Planned dates for research stay from  until

Desired duration of research stay (Applies only for *Research Stay* applications)

☐ 1 month/Monat

☐ 2 months/Monate

☐ 3 months/Monate

#### 5. Please describe the proposed research project for your stay (200-400 words)

## 6. Checklist of application documents

(please make sure to submit the following with your application)

<input type="checkbox"/>	Applicant's CV
<input type="checkbox"/>	Host's agreement (please use the template provided on webpage). This letter will be sent directly to the International Scholars & Welcome Office by the host.
<input type="checkbox"/>	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 " <a href="#">KIT Research Alumni Network membership application</a> " from our webpage)

## 7. Declaration of consent

I hereby declare that the above statements are correct and complete. The Karlsruhe Institute of Technology and the Alexander von Humboldt Foundation have my permission to store and process my personal information in electronic format for administrative purposes including review, statistical analysis and evaluation.

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](mailto:researchalumni@intl.kit.edu)

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