**Application form:** Conference funding

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| --- | --- |
| BASIC INFORMATION | |
| First and Last Name |  |
| Year of study |  |
| Supervisor’s name |  |
| Conference name |  |
| Conference location |  |
| Dates |  |
| Organizers |  |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  | | --- | | 1)(Intended) type of participation (oral presentation/poster). | |  | | 2)The link between the conference and the student’s PhD project. | |  | | 3)Please indicate whether you have already registered for the event or had the abstract accepted/submitted. Please attach the confirmation (e.g. an email) to the application form. | |  | | 4) Estimated costs. | | **Fee:**  **Travel:**  **Accommodation:**  **Daily allowance:**  **Other:** | | 5) Have you ever received the funding for a conference from the CogNeS Programme (YES/NO, if YES please specify when)? | |  | | 6) Please indicate other sources of funding (received or applied for, intended to apply for) for the current conference, if applicable. | |  | | 7) Additional remarks | |  | |

I hereby declare that in case I am granted the funds for the conference from the CogNeS Programme, before departure I will provide the Head of the CogNeS Programme with copies of statements from conference organizers confirming the acceptance of the presentation/poster or the copy of the conference program containing information about my authorship or co-authorship of a submission.

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Applicant’s signature Supervisor’s signature

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| DECISION | |
| Positive/Negative |  |
| Granted amount |  |
| Justification (if the decision is negative) |  |

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Head of the CogNeS Doctoral Studies Head of the CogNeS Programme

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Member of the committee