



DZD NEXT Research Travel Grant

Applicant

Name

Date of birth

Institute

Working Group Leader

Address

Email

Telephone

Hosting Lab

PI

Affiliation

Date: From _____ until _____ -

Estimated costs: Travelling: _____ € Accommodation: _____ €

Project Description:

Place, date

Place, date

Signature (applicant)

Signature (group leader)