INCOMING RESEARCHER

to be completed by the host institute



DETAILS OF THE INCOMING RESEARCHER

Mr. Ms. Other	
Last name	First name
Date of birth	Nationality
Country of residence	
E-mail address	
STATUS	FUNDING
PhD student	Work contract with hours / week
Postdoc	Scholarship Funded by home university abroad
Visiting researcher	Own funding Other:
Planned arrival / departure	
Start and type of employment	
Additional information (e.g. family reunion)	
CONTACT DETAILS OF THE HO	ST
Host institution	
Institute / Chair	
Name and position of supervisor	
Phone / E-mail address of conta	act person /

Date

Please make sure that you're authorised to transfer the data before sending us the form. No signature required

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