**Application form for resources from the international account**

(It is only possible to apply for transportation expenses)

1. *Applicant*

The title of the activity which is being applied for:

Is it a meritive stay /how many ECTS:

Time of departure and excursion length:

Contact person: Social security number

 Name

 Address

 Phone number (cell phone highly preferred)

 E-mail

 Semester

 Field of study

1. *Amount applied for and account information*

There is applied for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Kr. (calculated in point 4)

1. *The activity in which the applicant wishes support for*

Destination: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A description of the purpose and content of the activity plus the anticipated participation (an elaborated description may be enclosed as appendix):

1. *Budget*

The budget formula below must be filled out. A more detailed budget may be enclosed as appendix (a maximum of one page). Every expected expense must be included in the budget. Including expenses to which is not being applied support for, but which has something to do with the project.

Expenses/ expected expenses

1.

2.

3.

4.

5.

6.

The total of expenses/ expected expenses kr.

Amount applied for (listed once more)

If you have applied for support elsewhere please note the sum granted:

The application together with appendixes (kopi) is to be sent to Susanne Nicolaisen – snicolaisen@health.sdu.dk

Remember NOT to send in the original appendixes with the application as these will be used as documentation when making the cash settlement after the grant has been approved.

Date\_\_\_\_\_\_\_\_\_\_ Name\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_