**Application for Internal University Research Funding**

**Organization of Academic Events**

1 application per person per a year

**1. Applicant**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title: | Ms./Mr./Mx. | |  |  |
| Last name, First name: |  | | Year of birth: |  |
| Academic degree: |  | | Position: |  |
| Institute / Chair /  Department / Faculty: |  | | | |
| Telephone: |  | E-mail: |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| Information about your position: |  | Fixed-term contract until: MMMM DD, YYYY | |
|  |  |  | |
|  |  | Permanent contract | |
|  |  |  | |
| Job number (“*Stellennummer*”): | |  |  |

**2. Information about the event**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Title: |  | | | | | | | | | | | | |
| Location: |  | | | Date: | | | | |  | | | | |
| Type of event: |  | Academic event | | |  | | Event for early-career researchers | | | | |
|  |  | | | | | | | | | | | | |
| Professional society involved, if applicable: |  | | | | | | | | | | | | |
| Organized by: |  | | | | | | | | | | | | |
| Expected number of active participants from abroad: | | |  | | |  | |  | |  |  | |
| Expected total number of external active participants: | | |  | | |  | |  | |  |  | |
|  | | |  | | |  | |  | |  |  | |
| Have other applications for cost coverage been submitted? | | | Yes | | |  | | No | |  |  | |
| If so, where were these applications submitted? | | |  | | | | | | | | | |
|  | | |  | | | | | | | | | |
| Is there a participation fee? | | | Yes | | |  | | No | |  |  | |
| If so, in what amount? | | |  | | | | | | | | | |
|  | | |  | | |  | |  | |  |  | |
| Is there otherwise complementary funding for the event? | | | Yes | | |  | | No | |  |  | |
| If so, who is providing the funding and in what amount? | | |  | | | | | | | | | |

**3. Attachments**

Please enclose the following documents:

|  |  |
| --- | --- |
| **Brief** project description with topic and key questions |  |
| List of participants |  |
| Program, or draft program, if applicable |  |
| Financing plan with a list of **all** costs incurred |  |
| Justification of the requested funds |  |
| Details or proof of applications submitted to other sponsors or applicant’s own contributions |  |

**4. Declaration of the applicant**

**The applicant confirms** that they will disclose all applications for complementary funding for this or similar projects submitted to other funding programs at the university (e.g. high-potential and top-level research areas, see below) or to other funding agencies promptly and without further request, and that **double funding from third parties is excluded**.

Furthermore, **the applicant confirms** that a copy of the application was forwarded to the **appropriate Dean's Office**.

If the application covers a topic of a **high-potential or top-level research area**

([https://research-profile.uni-mainz.de/research-initiative/](http://www.uni-mainz.de/forschung/2140_DEU_HTML.php)),

an additional copy of the application was sent to the **spokesperson of the research area**.

**Complementary funding** in a high-potential or top-level research area **is possible in the amount of €\_\_\_\_\_\_\_\_/ is not possible** *(strike through what does not apply)*.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date, applicant’s signature

**5. Declaration of the head of the institute/department or the equivalent higher-level structural unit**

|  |  |  |  |
| --- | --- | --- | --- |
| The present application is approved by the **head of the institute/department/faculty** (*please select the authorized signatory from your higher-level structural unit, strike through what does not apply)*.  *If the applicant and the head of the higher-level structural unit are the same person, the application must be signed by the deputy*. | | | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Applicant’s name | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date, applicant’s signature |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of the head of the higher-level structural unit | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date, signature of the head of the higher-level structural unit |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Stamp of the structural unit | |