



# UNIVERSITY OF BERGEN

## *Faculty of Medicine*

### Application for financial support for research stay abroad for UiB financed PhD and Research Fellow positions

Applications must be submitted to the department. **The Faculty's deadline is 01.03. and 01.10.**

First name:		Last name:		
Employee number:		Department:		
Position:				
Period for your research stay	From date:		until date:	
Name and address of visiting research institution:				
Brief summary of planned research during your stay abroad:				
Have you applied to maintain membership in the Norwegian National Insurance Scheme:			Yes:	No:
Travelling on my own or with spouse/registered partner			NOK 20.000/month	
Travelling with a child or children under 18			NOK 30.000/month	

#### Attachments:

Letter of invitation

Project description for your research stay (max. 1- 3 pages)

overview/budget over travel expenses (most economical mode of transport)

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Place and date

signature applicant

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Place and date

signature supervisor



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## To be filled in by the department

	Application is recommended
	Application is NOT recommended

Justification, if the application is **not** recommended:

total number of applicants at the department:	
This is set to priority number:	

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Place and date

signature Head of Department

when all applications have been received and evaluated by the department management, these are sent together, with attachments, to: **post@med.uib.no**