

RESEARCH TRAVEL GRANT
(PhD OR FAST-TRACK)

		REF.	
SURNAME		GIVEN NAMES	
		STUDENT NO.	
ACADEMIC UNIT	TELEPHONE NO.	OFFICE	LABORATORY
E-MAIL			
STUDENT SESSION AT THE TIME OF THE STAY		PH.D. SESSIONS 3 TO 12	FAST-TRACK PROGRAM SESSIONS 2 TO 15
LOCATION OF THE STAY	CITY	COUNTRY	
DATE OF THE STAY	FROM		TO
	YEAR	MONTH	DAY
	YEAR	MONTH	DAY
EXPLAIN BRIEFLY THE RELEVANCE OF THIS STAY.			

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_____ DATE _____ SIGNATURE (REQUESTER)

RECOMMENDATION (SUPERVISOR)

RECOMMENDATION (INCLUDING JUSTIFICATION OF THE RELEVANCE OF THE REQUEST AT THIS STAGE OF RESEARCH PROGRAM OF THE CANDIDATE)

NAME (PLEASE PRINT)

E-MAIL

_____ DATE _____ SIGNATURE (RESEARCH SUPERVISOR)

FOR USE OF THE FACULTY OF GRADUATE AND POSTDOCTORAL STUDIES

APPROVAL

NAME OF THE VICE-DEAN GRADUATE

_____ DATE _____ SIGNATURE (VICE-DEAN GRADUATE)