EISA Office

 c/o C-IN

5. května 65, 140 21 Prague 4

Czech Republic

mobilityfund@eisa-net.org

EISA x Konrad-Adenauer-Stiftung Mobility Grants

the applicant

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name** |  | Email |  |
| Affiliation |  |
| Gender |  |
| Address |  |

qUalifying information

|  |
| --- |
|[ ]  I confirm being an EISA member at the time of this application |
|[ ]  I confirm that I do not have alternative sources of funding for my participation in this conference(*Please submit a supporting document with signature from your institution along with this application*) |

additional information (PLEAsE TICK ALL RELEVANT BOXES)

|  |
| --- |
|[ ]  I participated in AND/OR organised panels/roundtables/sections at previous EWIS and PEC events.Please list your past involvement at EWIS and PEC events: |
|  |  |

the event

|  |  |
| --- | --- |
| **EVENT***(for which funding is sought)* |  |
| ROLE IN THE EVENT*(what role[s] do you have in this event)* | \*please add the workshop(s) you participate in/present your paper  |
| INSTITUTIONAL LOCATION *(country of your institution — not citizenship)* |  |
| LEVEL OF INCOME*(what is your yearly income)* |  |
| PERSONAL STATEMENT*(Please provide a short statement (max. 500 words) on why you are applying for the mobility fund scheme and how you are planning to use the financial support)* |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| **City and Date** |  | **Applicant Signature** |