Office for Equal Opportunities

Last updated 01 January 2017

Ulm University  
Office for Equal Opportunities  
Albert-Einstein-Allee 11

89081 Ulm, Germany

Application form 'Financial support for female scientists'

**Research visit**

A measure of the Programme for Women Professors II (PPII)

**Please submit this form to the Office for Equal Opportunities at least four weeks before the beginning of the requested measure to allow for timely processing of your application.**

|  |  |  |
| --- | --- | --- |
| **Application Number:** (to be allocated by the PPII project coordinator) | | Date: \_\_\_.\_\_\_.\_\_\_\_\_\_ |
| Faculty:  Academic department:  Institute/Clinic: |  | |
| Full name of the applicant: |  | |
| Status: | ☐ Doctoral candidate ☐ Post-doc ☐ Habilitation candidate  ☐ Scientist qualified to teach and supervise doctoral/PhD candidates  since: \_\_\_.\_\_\_.\_\_\_\_\_\_ | |

|  |  |  |
| --- | --- | --- |
| Details of the research visit:  Advance payment  If you wish an advance payment, please make a note of that in your travel request and state what the advance payment is for (e.g. conference fees, flights, etc.).  Please note that only **one** advance payment will be made. The **original** business travel request will be needed for the disbursement of the advance payment. | **Please attach a copy of your business travel request!**  Name and location of the institution:  Duration of stay: from \_\_\_.\_\_\_.\_\_\_\_\_\_ to \_\_\_.\_\_\_.\_\_\_\_\_\_  Estimated costs:  Purpose of the visit  Please describe the objective(s) and relevant milestones of your visit (abstract and schedule): | |
| I herewith certify that the information provided in this application is true and given in good faith. | | |
| Applicant's signature: |  | |
| Statement by the academic supervisor \*): |  | |
| The gender equality promoting measures of the Programme for Women Professors II (PPII) are complementary measures to promote gender equality. We confirm that, in case of approval of the application, the applicant will have access to institute funds to the same extent as her male colleagues. | | |
| Academic supervisor \*) | Name | Signature |
| Dean’s Office \*) | Name | Signature |

\*) To be completed by the academic supervisor as well as the Dean’s Office

Dear applicant,

the project coordinator of the Programme for Women Professors II (PPII) will inform you via email about the approval of your funding request.

Kind regards,

your Equal Opportunities Team

**Annotation by the PPII project coordinator**

☐ The requested funding is in accordance with the directives of the Programme for Women Professors II (PPII). The application is approved.

☐ The requested funding is not in accordance with the directives of the Programme for Women Professors II (PPII). The application is rejected.

The final report must be submitted to the Office for Equal Opportunities by \_\_\_\_.\_\_\_\_.\_\_\_\_\_\_\_\_.

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