

## **Training Grant Financial Application Form**

| Name  |            |       |  |
|---|------------|-------|--|
| Home Institution  |            |       |  |
| Hosting Institution   |            |       |  |
| Dates of attachment   |            |       |  |
| Title of research proposal to be conducted in the hosting centre  |            |       |  |
| conducted in the nosti  | ing centre |       |  |
|   |            |       |  |
|   |            |       |  |
| Telephone   |            |       |  |
| Email   |            |       |  |
| Bank account details  |            | Name  |  |
|   |            | IBAN  |  |
|   |            | SWIFT |  |
|   |            |       |  |
| Leading and address the account of Cl   |            |       |  |
| I acknowledge the award of €[] from the ESPN to support this training grant.                                    |            |       |  |
| I will have to provide a training report within one month after the end of my traineeship.                      |            |       |  |
| I will acknowledge the support of the ESPN in all presentations and publications that arise from this supported |            |       |  |
| project.  |            |       |  |
| Signed  |            |       |  |
|   |            |       |  |
| Date  |            |       |  |
|   |            |       |  |

Please return this form and all grant reports to <a href="mailto:secretaryespn@oic.it">secretaryespn@oic.it</a>