B.1. Title of the project

B.2. CV (with publication list) and affiliation of the Young Researcher

Name:

Institution address:

Email: Phone:

CV:

B.3. CV (with publication list) and affiliation of the Senior Author (“Mentor”)

Name:

Department:

Institution address:

Email: Phone:

CV:

**SIGNATURES**

*Young researcher:*

I, the undersigned Young Researcher ……………………………………………………., accept the conditions of the EUSOBI Young Researcher Grant.

Date: Signature:

*Mentor:*

I, the undersigned Mentor ………………………………………………………………….., accept the conditions of the EUSOBI Young Researcher Grant.

Date: Signature:

*Chief of the department:*

I declare that the abovementioned Young Researcher will be allowed to perform his research in the Department directed by myself and that …………………………. (Mentor) will be responsible for his mentoring during the project. I also accept the conditions of the EUSOBI Young Researchers Grant.

Date: Signature: