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| --- | --- |
| **Host researcher:**  First name, last name, title |  |
| **Host university and department** |  |

|  |  |
| --- | --- |
| **Visiting researcher:**  First name, last name, title |  |
| **Exchange dates:** From – Till (DD.MM.YYYY) |  |

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| **Sending university and department** |  |

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| **Exchange benefits for the host and sending institutions** |
|  |
| **Prospective cooperation between the host and sending institution** |
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| **Confirmation** | |  | | |
| Funding amount: \_\_\_\_\_\_\_\_\_\_\_\_\_ EUR  Co-financing amount: \_\_\_\_\_\_\_\_\_\_\_\_\_ EUR | | The 20% co-financing will be transferred to the IPID4all account by | | |
| Host researcher | | Visiting researcher |
| Host Statement | | Visiting Researcher Statement | | |
| I hereby confirm that we are willing to host the above mentioned researcher in our research group. During the stay we will provide the researcher with all necessary assistance. | | I hereby confirm that we support the exchange for the stated period | | |
| Signature & Stamp, Host Research Group | | Signature & Stamp, Sending Research Group | | |