**APPLICATION FOR MICROFUNDING**

**Supervisor’s/head of department’s details**

|  |  |
| --- | --- |
| First name |  |
| Last name |  |
| Job title |  |
| Department |  |
| Email address |  |
| Phone number |  |

**Applicant’s details**

|  |  |
| --- | --- |
| First name(s) |  |
| Middle name(s) |  |
| Last name(s) |  |
| Current address\* |  |
| Nationality |  |
| Email address |  |
| Phone number |  |
| Job title |  |
| Department |  |
| Starting date at AU |  |

\*Residence at time of application

**Applicant’s bank details**

|  |  |
| --- | --- |
| Non-Danish Bank Account Number |  |
| SWIFT code |  |
| BIC number |  |

**Statement of recommendation from the supervisor**

Please provide a reason for the applicant to receive microfunding from AUFF.

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What type of costs does the applicant plan on using the funds for? (E.g. travel expenses, rent, etc.)

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|  |

*The signature below confirms that this Institute/Department recommends this applicant for microfunding from the Aarhus University Research Foundation (AUFF).*

|  |
| --- |
| Full name: |
| Job title: |
| Signature: |

**Signed and dated by the Head of the Institute/ Department**

Please attach the signed contract, acceptance of offer of employment or documentation for employment at AU.