PATVIRTINTA

Kauno technologijos universiteto

rektoriaus 2020 m. vasario 18 d.

įsakymu Nr. A-91

INTERNATIONAL SCIENTIFIC EVENTS’ FUND APPLICATION FORM

**For funding participation in the international scientific event**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name, surname** |  | | | | | |
| **Field of science** |  | | | **Year** | |  |
| **Faculty / Institute** |  | | | | | |
| **Tel. no.** |  | | **E-mail** | |  | |
| **Scientific Supervisor** |  | | | | | |
|  | | | | | | |
| **Have you previously received funding from Fund?** | | |  | | | |
| **If *yes*:** | | | | | | |
| * **please indicate the amount, date and purpose** | | |  | | | |
| - **please indicate achieved results in the Event (of the last Fund’s funded Event)** (paper in the scientific journal of "CA Web of Science"/"Scopus" database, paper in the proceedings of the conference presentations, refereed in "CA Web of Science"/"Scopus" databases, paper in the publications non-refereed in the databases; received awards in the Event; other achievements) | | |  | | | |
|  | | | | | | |
| **Title of international scientific event** | |  | | | | |
| **Date of international scientific event** | |  | | | | |
| **Place of international scientific event** | |  | | | | |
| **Inviting organisation** | |  | | | | |
| **QS rating of the inviting organisation** (if inviting organisation is a University; if the University is not rated in the QS, specify another rating and position) | |  | | | | |
| **Edition of the Event** | |  | | | | |
| **Web link to the Event’s website** | |  | | | | |
| **Purpose of necessary funding** | |  | | | | |

*(in accordance with the Regulations on the Fund for International Scientific Events)*

**Short reasoning of requested funds and prospective method for dissemination of presented scientific results**:

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| --- |
|  |

Estimate of expenses of international scientific event:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Title of expenses | Total amount of expenses, Eur | Amount received from other sponsors, Eur | Amount requested from Fund, Eur |
| 1. |  |  |  |  |
|  |  |  |  |  |
|  | Total: |  |  |  |

**Enclosed documents**:

|  |  |
| --- | --- |
| No. | Title of document |
| 1. |  |
|  |  |
|  |  |

I confirm, that provided information is correct and accurate.

I confirm, that information on submission of this application and provided data in it are known to head of department and scientific supervisor.

Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*(signature)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
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