



- We ask the candidate to send this application via email only to re.connect@uni-muenster.de
- Please read the information on funding lines in the Goals and Guidelines

Serial no. (to be filled by IO)

## **Application for the RE.connect fellowship**

### Part to be filled by the candidate

#### 1. Candidate's general information

(only Researcher-Alumni of the University of Münster are eligible)

| Personal Information |  |  |
|----------------------|--|--|
| Pronoun              |  |  |
| Academic title       |  |  |
| First Name(s)        |  |  |
| Last Name            |  |  |
| Date of birth        |  |  |
| Nationality          |  |  |

| Home address     | Current workplace details |
|------------------|---------------------------|
| Street, house no | Name of the institution   |
|                  | Institute                 |
|                  | Street, house no          |
| Postcode         | Postcode                  |
| Town or City     | Town or city              |
|                  | Country                   |
| Country          | Work Email                |
| Email            | Phone (Landline)          |
|                  | Position at the           |
|                  | University                |
| (Mobile) Phone   | EUN Ulysseus Yes          |

| Information on your hosting institution at University of Münster |  |  |
|--|--|--|
| Hosting Faculty  |  |  |
| Hosting Institute  |  |  |
| Hosting Professor  |  |  |
| Address  |  |  |
| Email to the contact person (Professor/Dean/                     |  |  |
| Secretary)   |  |  |
| Phone (Landline)   |  |  |

| Research-Alumni Member of the University of Münster   |      |  | Yes |  |
|---|------|--|-----|--|
| Dates of your last research stay  | From |  | То  |  |
| <ul> <li>Do you agree to act as a 'Contact Person' for the University of Münster at your current<br/>university?</li> </ul> |      |  |     |  |

## 2. Re.connect fellowship planned research stay- part to be filled by the candidate

| Type of the activity  |      |  |    |  |
|---|------|--|----|--|
| Other, specify:   |      |  |    |  |
| Funding line  |      |  |    |  |
|   |      |  |    |  |
| Dates of the planned stay   | From |  | То |  |
| Describe your proposed cooperation research activities, ideally with a timeline. Explain the relevance to undertake those activities at the hosting institution. How do you envision this project having a significant impact on international collaboration with University of Münster and the social-economical innovation. (Max 500 words) |      |  |    |  |
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Describe activities you are going to undertake at your home institution as University of Münster Research-Alumni Contact Person in order to promote the University abroad and help building network after the research stay at the ax 500 words)

|          | uld my application be approved, I agree to accept the funding from the University of Münster. I understand that I <b>obliged</b> to:  |  |  |
|----------|---|--|--|
| <b>→</b> | use the funding for the purpose for which it was requested and granted, and to adhere to the <b>RE.connect</b> funding guidelines.  |  |  |
| <b>→</b> | immediately notify Re.connect Coordination Office ( <a href="mailto:re.connect@uni-muenster.de">re.connect@uni-muenster.de</a> ) in writing of any changes to the original application or my personal details (e.g. address, email, etc.)   |  |  |
| <b>→</b> | have adequate <b>insurance coverage</b> , since these costs are excluded from funding.  |  |  |
| <b>→</b> | reimburse funding in part or whole if I fail to carry out the project, terminate the stay prematurely without the permission of the University of Münster or violate the obligations provided here and in the funding guidelines. I am aware that possible reclamation of funds can be enforced through legal channels. |  |  |
|          | I attached my CV (without a list of publications) to the application.   |  |  |
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| Ci       | ty, date Signature of the candidate   |  |  |

# 3. RE.commendation letter from the hosting professor- Part to be filled in by the hosting institution

| tainable networking: Describe activities and measures, ideally with financing, which will sustain a relopment of the cooperation and establishing a long-term network with the fellowship candidate after the earch stay? (Max 500 words) |
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Describe what makes the person a good candidate for this cooperation and this fellowship. Refer to the previous collaboration/ publications. (Max 500 words)

| Comments:   |  |  |
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| <ul> <li>I declare to provide needed working facility at the insagreed prior to the application.</li> </ul> | titute for the RE.connect fellowship holder,                   |  |
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|   | Signature of Hosting Professor or the Dean (for faculty dept.) |  |