Place, date



Application for the TUM Graduate School internationalization support

Applicant:							
Family name:		Birth name:					
Given name:							
Application for the refund for t	he following activity:						
Presentation of one's scientif	ic results at the following internation	nal conference etc. (name, host and location of the event):					
International research stay at the research institution/company (name and location of the host institution):							
Participation at the international summer/winter school, workshop, symposia etc. (name, host and location of the event):							
Invitation of international scie home institution):	ntists for joint research activities tha	at are part of one's doctoral project (guest name and name of the					
Invitation of international exa	miners for the oral examination (nar	me of examiner and the home institution):					
Start date of the journey:		End date of the journey:					
Start date of the internat. activity:		End date of the internat. activity:					
The internationalization a	ctivity will be combined with a pr	ivate vacation					
from	until to						
Application for the refund:	before the activity	after the activity					
Place, date	Signature a	pplicant					
To be filled in by the supervisor:							
I confirm that the international	ization activity applied for is bene	eficial for the realization of the applicant's doctoral research.					
Place, date	Signature d	loctoral supervisor					
	fulfilled (to be filled in by the Graduate C	Center)					
The application is approved (approve as applied for with the following restriction(s):	al is subject to the final assessment by th	ne TUM-GS Management Office and the amount of the available refund):					

Signature Graduate Center



Funding Table (attachement to the TUM-GS Application for internationalization support)

Private addr	ess:						
Bank account holder:		IBAN:		BIC:			
Receipt No.	Date	Description	Costs	Currency	Exchange ratio	EUR	
1							
2							
3							
4							
5							
6							
7							
8							
☐ I herewit	h confirm that t	he costs have not been reimbursed elsewhere/by another party	(e a the host	· ·	EUR):		
☐ I herewit	h confirm that r	my scholarship provider does not provide any funding for the apport from my scholarship provider prior to this application.				oossible	
☐ Any finan	cial means offe	ered by my scholarship holder will not be reduced of the amoun	t of the TUM-0	GS financial suppo	rt I'm applying for.		
Place, date		Signature applicant:					