

## GEIVEX MOBILITY FELLOWSHIPS APLICATION FORM

<b>1. APPLICANT</b>	
Name and Surname	<input style="width: 95%;" type="text"/>
N.I.F.	<input style="width: 95%;" type="text"/>
Institution	<input style="width: 95%;" type="text"/>
Address	<input style="width: 95%;" type="text"/>
<input style="width: 100%;" type="text"/>	
Phone	<input style="width: 95%;" type="text"/>
e-mail	<input style="width: 95%;" type="text"/>

<b>2. Data of the Stay</b>	
Dates	<input style="width: 80%;" type="text"/>
Head of the Laboratory	<input style="width: 95%;" type="text"/>
Institution	<input style="width: 95%;" type="text"/>
Address	<input style="width: 95%;" type="text"/>
<input style="width: 100%;" type="text"/>	
City	<input style="width: 95%;" type="text"/>
Country	<input style="width: 95%;" type="text"/>

Applicant signature

Head of the recipient laboratory signature

At....., on the .....of 20..

At....., on the .....of 20..

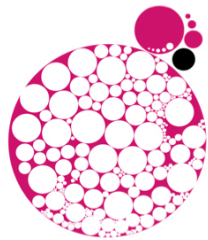


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**Vesículas Extracelulares**

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MOTIVATION LETTER (1 page)



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PROJECT DESCRIPTION (max 1 page). Include background, general aim of the project, specific aims for the mobility grant and expected results



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EXPERIMENTAL WORKPLAN (max 1 page) Include a chronogram with detailed plan



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ESTIMATED BUDGET (fellowships do not cover bench fees or reagents). Maximum amount granted is detailed in the call.



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ACCEPTANCE LETTER FROM THE HOST LAB