Faculty of Informatics and Data Science

The Women's Representatives

University of Regensburg

Bajuwarenstraße 4

93053 Regensburg

**Application for Funding from the Financial Incentive System**

1. **Personal Information**

Name, First Name:        
Title:        
Professional Address  
Street:

Postal Code/City:

Professional Phone:        
Professional Email:

1. **Art of Requested Funding (Purpose of Use)**

SHK or WHK positions for female doctoral candidates, postdoctoral researchers, and postdoctoral lecturers with an employment contract at the UR

Initial, bridging, and final funding of doctoral studies

Travel cost subsidies for participation in and organization of conferences, workshops, and conferences (possible only once)

Information events outside the university

Procurement of literature and software

Printing cost subsidies for doctoral or postdoctoral theses or other publications

Support for guest lectures by female scientists outside the UR or for invitations of cooperation partners by female scientists of the UR

Further education

Measures of the FIDS equality concepts

Other materials, provided they are related to scientific work

Other

Period for which funds are requested:

Description of the project and the objectives of the planned work:

Mandatory additional information (e.g., active mentoring activities, family situation, career planning, such as doctoral studies, habilitation):

1. **Listing and Description of Expenditures**

Up to €750 can be funded, with the total funding for an individual generally limited to €1,000 per year. First-time applications are given preference.

The following costs are expected (fill in the table accordingly):

|  |  |  |  |
| --- | --- | --- | --- |
| **Date** | **Purpose of Use** | **Amount** | **Short Description** |
| …………. | Example | ..,.. € | e.g., travel to conference XY |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Total Amount: -----****Euro-----**

**For all expenses, receipts must be submitted immediately after payment using our receipt form.**

1. **Declaration of Completion**

I hereby confirm that all information is correct:

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 Place, Date (Signature)