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:

----------------------------------------------- -----------------------------------------------
 Place, Date (Signature)