



Research Stay Fund – Application Form

DSE members may request reimbursement for expenses (listed in the Information Sheet on Reimbursement Claims) associated with external research stays at universities or organizations. They must have completed the public presentation (FÖP) and have signed the doctoral thesis agreement. They are expected to complete their thesis (and annual progress reports) within the usual timeframe.

- ❖ Submit this completed form to dse@univie.ac.at (Subject Line: “Research Stay Fund - Last Name”) as soon as possible **before** the planned stay, for European stays at the latest 4 months in advance and for non-European stays, if possible, 8 months in advance.
- ❖ Applicants should submit the partially completed application form, together with their latest annual progress report, to their supervisor(s).
- ❖ Supervisors should submit the fully completed application form, together with any annual progress reports, to dse@univie.ac.at (Subject Line: “Research Stay Fund - Name of applicant”)
- ❖ Applicants should keep all original receipts for reimbursement purposes.
- ❖ Employees and externally funded researchers must provide proof that they have no other funding from their faculty, institute, or funding agency for this concept (an email from the responsible administrator may constitute proof), or inform about available funds.

I declare that I have read, understood and agree with the conditions for reimbursement as stated in the Information Sheet on Reimbursement Claims.

Applicant details	
Name, Last name	
Department / Centre	
Student ID number	
Date of birth	
Email	
Personal details	
Street	
Postal code, city, country	
Bank account details	
Name of account older	
Banking institution	
IBAN	
BIC/SWIFT	



Expense type (e.g. travel, visa, accommodation)	Estimated costs (in Euro)
Total costs of the research stay:	
Costs covered by other funds:	
Requested amount of DSE-funding:	

State the rationale for undertaking this placement. Consider how it will contribute to the successful and timely completion of the dissertation, wider skills or career development. (up to 500 words)

Date:

Signature:



FOR COMPLETION BY THE FIRST SUPERVISOR:

Last Name, First Name:	
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Please provide a supporting statement explaining why you, as supervisor, believe this placement would be worthwhile (up to 500 words).

Date:

Signature:

FOR COMPLETION BY THE SECOND SUPERVISOR (if applicable):

Last Name, First Name:	
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Please provide a supporting statement explaining why you, as supervisor, believe this placement would be worthwhile (up to 500 words).

Date:

Signature:



FOR COMPLETION BY THE DSE BOARD

Decision of the head of the DSE	
<input type="checkbox"/> Approved	Maximum amount* in €:
	Conditions:
<input type="checkbox"/> Rejected	Reasoning:
Date Signature	