

Łódź, date:

.....
Name and surname

.....
Discipline/ Index No.

.....
.....
Name and surname of the Supervisor / title of the doctoral thesis

Director of the Doctoral School of Humanities of the University of Lodz
dr hab. Joanna Sowa, prof. UL

APPLICATION FOR FUNDING

I would like to ask University of Lodz Doctoral School of Humanities for funding of the following:
participation in a conference / publication / materials / services / other*

I am applying for funding in the amount of...

1. Conference/Scientific query

.....
Title of the conference, place and date, type of the conference (on-line, stationary)/Scientific query – date and place

.....
Title of the speech

.....
Date of departure and return

2. Publication

.....
Title of publication/ name of the journal or publishing house/number of points/purpose of funding, e.g. publication fee, proofreading

3. Materials (e.g. office supplies, purchase of books and magazines, materials necessary for the implementation of the project - please indicate the type of purchase in detail)

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4. Services (please indicate the type of service in detail)

.....

5. Other (e.g. purchase of licenses, access to scientific services and databases)

.....

Estimate

#	Item	Detailed list of expenses	Cost of individual items
1	Conference/Scientific query (please indicate the cost of the activity that will be funded, e.g. conference fee, accommodation, travel):	a) conference fee: b) accommodation: c) transportation: d) travel allowances:	
2	Publication (please indicate the activities which will be funded):		
3	Materials		
4	Services		
5	Other		
Total			

I declare that I have not obtained funding from other external or university sources for the indicated items.

I declare that the obtained funding will be spent and settled in the current calendar year.

.....
 Date and signature

Opinion of the Doctoral Supervisor (whether the activity is related to the preparation of the thesis):

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.....

.....
Date and signature of the Doctoral Supervisor

Decision of the Director of University of Lodz Doctoral School of Humanities:

I accept/do not accept*

*Delete as applicable

.....
Date and signature of the Director