

**APPLICATION FORM**

**Nicholas Gourtsoyiannis Teaching Fellowship 2019**

Please submit this form to: [esor@myesr.org](mailto:esor@myesr.org)

**1) PERSONAL DATA**

Prof./Dr./Mr./Mrs./Ms. (please indicate) ..... ESR ID:.....  
 First name: ..... Family name: .....  
 Institution: .....  
 City: ..... Zip Code: ..... Country: .....  
 Phone: ..... Email: .....

**2) INFORMATION ABOUT 1<sup>ST</sup> VISIT**

**2a)** Please list the institution, which agreed to host you for this project:

Institution	Head of Department	City	Country

**2b) Title of lecture/workshop 1**

.....  
 .....

**2c) Title of lecture/workshop 2**

.....  
 .....

**2d)** Proposed start date ..... Proposed end date .....

*(Each visit should ideally last 1 week)*

**3) INFORMATION ABOUT 2<sup>ND</sup> VISIT**

**3a)** Please list the institution, which agreed to host you for this project:

Institution	Head of Department	City	Country

**3b) Title of lecture/workshop 3**

.....  
 .....

**3c) Title of lecture/workshop 4**

.....  
 .....

**3d)** Proposed start date ..... Proposed end date .....

*(Each visit should ideally last 1 week)*

**By submitting this application, I declare that the information supplied by me in this application and supporting documentation is complete, true and correct. I have carefully read the instructions and agree that my personal data may be processed and stored for the purpose of application and evaluation.**

Date: .....

Signature: .....

## APPLICATION CHECK LIST

### Nicholas Gourtsoyiannis Teaching Fellowship 2019

Tick the boxes when you have completed the following steps:

- Signed application form
- Confirmation letters from chosen training centres
- ESOR Curriculum Vitae
- Motivation letter
- 2 letters of recommendation

Date: .....

Signature: .....