

IIIT RESEARCH GRANTS (EUROPE)

APPLICANT INFORMATION

Name:		
Current address:		
City:	Country:	Post Code:
Email:	Tel:	Fax:

EMPLOYMENT INFORMATION

Current employer:		
Position/Title:		
Employer address:		
City:	Country:	Post Code:
Email:	Tel:	Fax:

ABOUT RESEARCH

Title:
Type of Grant / Fellowship:
Type of support requested:
Dates for research (from – to):
Do you agree to publish research outcome(s) with IIIT?
Expected outcome(s) and time of delivery:

RESEARCH SUPPORT (LIST SOURCE, AMOUNT, AND PERIOD OF TIME COVERED ALREADY IN PLACE FOR THIS RESEARCH; WRITE 'NONE' IF NONE)

Source	Amount	Time Period

BUDGET REQUESTED – ITEMIZED

Item 1:	Item 2:
Item 3:	Item 4:
Item 5:	Item 6:
Item 7:	Item 8:
Item 9:	TOTAL REQUESTED:

SIGNATURE

I agree, by the act of applying for a IIIT Grant to abide by IIIT Policies and Guidelines for Research Grants.

Signature of applicant:

Date: