



# GRANT APPLICATION FORM

*This Form should be submitted to the Chairperson of the Scientific  
Organizing Committee by the specified deadline*

**APPLICANT:**

Family Name: .....

First Name: ..... Middle Name: .....

Birth Date: ..... Gender: .....  
(mm/dd/yyyy)

Academic Situation: ..... Citizenship: .....  
(PhD, Post-doc, Prof. Researcher, etc.)

Institute of Work: .....

Country of Work: ..... City of Work: .....

Address: .....

.....

E-mail Address: ..... Phone: .....

**MEETING:**

Meeting Title: ..... Meeting Number: .....

Location (city, country): .....

Dates of Meeting: .....

**PRESENTATION:**

Nature of contribution to the meeting: .....  
(e.g. review talk, thesis presentation, poster, etc.)

Title of presentation: .....

Amount of IAU support (in EUR) requested: .....

Comments: .....

Signature of applicant:

Date and place: .....

For Ph.D students, name of thesis Director/Supervisor: .....

Signature of thesis Director/Supervisor:

Institution: .....