Department of Political Science and Government, Aarhus University

Application  
Subsidy for international conference travel

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| CPR-number: |  |  |  |  |  |  | - |  |  |  |  |
| Position: |  | | | | | | | | | | |
| Name: |  | | | | | | | | | | |
| Address: |  | | | | | | | | | | |
| Postal code and city: |  | | | | | | | | | | |

|  |  |
| --- | --- |
| Purpose of the trip:  (Use extra sheet if necessary.  Enclose abstract, invitation, program, etc.) |  |
| Destination: |  |
| Time frame for meeting/conference: |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Estimated expenses:** | | | | | | | | **Foreign currency** | **Exchange rate** | **Amount in DKK** |
| Transportation: | | | | | | | |
|  | | | | | | | |  |  |  |
|  | | | | | | | |  |  |  |
|  | | | | | | | |  |  |  |
|  | | | | | | | |  |  |  |
|  | | | | | | | |  |  |  |
|  | | | | | | | |  |  |  |
| Accommodation: | | |  | | days @ |  | |  |  |  |
| Hotel: | | |  | | nights @ |  | |  |  |  |
| Fees (not including lodging/board above): | | | | | | | |  |  |  |
| Other expenses: | |  | | | | | |  |  |  |
|  | | | | | | | |  |  |  |
|  | | | | | | | |  |  |  |
| Total: | | | | | | | | | |  |
| Subsidy applied for/awarded from other source (total DKK): | | | | | | | | | |  |
| Date: |  | | | Source: | | |  | | |  |
| Total applied for: | | | | | | | | | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Applying for subsidy | from department |  |  | |
| from project |  | Project name: |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Has the applicant received travel subsidies from the department in this or in the two previous fiscal years? | | | | Yes |  | | No |  |
| If yes, please fill in: | | | | | | | | |
| Purpose: |  | Year: |  | Amount: | |  | | |
| Purpose: |  | Year: |  | Amount: | |  | | |
| Purpose: |  | Year: |  | Amount: | |  | | |
| Purpose: |  | Year: |  | Amount: | |  | | |
| Purpose: |  | Year: |  | Amount: | |  | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Is the applicant presenting a paper at the conference? | | Yes: |  | No: |  |
| Other comments: |  | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Date: |  | Applicant’s signature: |  |
| Department’s authorization: | |  | |