**Siebold Sasse Foundation**

QUESTIONNAIRE

Scholarship for ☐ Master thesis ☐ Doctorate ☐ Habilitation

(Please mark with a cross where applicable)

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| 1. **Applicant** | |
| Name, first name(s) : | |
| Date of birth: | Nationality: |
| Marital status: | Number of children: |
| Private address:  Phone:  Fax: | Business address, if applicable:  Phone:  Fax: |
| Email: | |

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| 1. **Project** | |
| Topic of the research project: | |
| Research Area: | ☐ Radioecology  ☐ Radiation protection  ☐ other (please give reasons) |
| Planned duration in months: | |
| Scheduled start: | |
| Caregiver: | |
| Have you already submitted a funding application elsewhere for the planned project  posed?  ☐ No  ☐ yes, at | |

|  |
| --- |
| 1. **Scientific and professional career** |
| Higher education entrance qualification (when, where): |
| Study (subjects, places of study, periods of study): |
| Academic exams (when, where, final grades): |
| Details of the doctorate (only for habilitation candidates) |
| Scientific activities since graduation: |
| Activities outside of academia (vocational training, professional work): |
| Has your work already been/will your work already be supported by third party grants (public sector  [e.g., funding by the Ministry of Science], DFG, foundations, associations and  the like) supported? If yes, please specify period of funding.  ☐ No  ☐ yes, by  On what topic? |
| What further scientific qualification are you aiming for? (e.g. junior professorship, university teaching career, activity in non-university research) |
| 1. **Commitment** |
| * I hereby certify the accuracy of the information provided in the questionnaire and throughout the application. * I agree to notify my university and the Siebold-Sasse Foundation immediately if I submit a grant application to another funding agency or discontinue the project, or if there are any other changes from the information provided in this questionnaire. * I am aware that false information may result in disqualification from the application process or   can lead to the revocation of the approved funding.   * Reporting requirements in the event of a grant:   In coordination with their office, I inform the Siebold-Sasse Foundation at annual intervals about the progress of the funded project.  Furthermore, I will provide the Foundation with suitable text and image material for public relations purposes upon request.  In scientific publications about the funded project, I point out in  usual form to the sponsorship by the Siebold-Sasse Foundation.  I undertake to inform the Siebold-Sasse Foundation of any gainful employment during the  scholarship in writing.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Place, date Signature |

Description of the project (max. four DIN A4 pages)

1. Topic of the research project
2. Summary
3. State of research
4. Own preparatory work
5. Aims of the research project
6. Work program
7. Recognized scientists (only for habilitation applications)