



Application Form IntCDC Incoming

APPLICANT

Last name		First name
Date of birth	Nationality	Gender
Doctoral Researcher	Po	ostdoctoral Researcher
Other (please specify):		
Name of Institution		
Faculty/ department		
Institute		
Address		
Country		
E-mail address		
Advisor (last name, first name)		
Topic of your research project		

RECEIVING INSTITUTION

Name of the institution		
Institute		
Coordinator /contact person IntCDC		
E-mail address		
Are you already in contact?	yes	no





MOBILITY DURATION AND DETAILS

Duration of the mobility (Excluding travel days)

FROM (dd/mm/yyyy

TILL (dd/mm/yyyy)

Total number of days (Including travel days)

Research field

PLANED ACTIVITIES (E.G. TEACHING, WORKSHOP, RESEARCH)

Notes

Hereby I confirm that all the information I have provided is correct and based on truth.

Date Signature of applicant:

Date, signature of main supervisor:





Application Procedure

Please submit your complete application as PDF to the Cluster's Collaboration & Knowledge transfer manager by mail to: incoming@intcdc.uni-stuttgart.de

Contact Person IntCDC:

Cluster of Excellence IntCDC Dipl. -Ing. Michaela Mey Keplerstraße 11 70174 Stuttgart

Checklist

- IntCDC incoming application form
- Planed activities with timeline
- Academic CV

Data Usage

The collected data is handled in accordance with the applicable data protection laws. Data is collected and stored for administrative purposes and to produce statistical reports as well as to provide answers to statistical queries. Data will only be analysed and published in anonymized form, i.e. such that it cannot be linked with a specific individual. In addition, the collected data serves as basis for statistical evaluations, which the Cluster of Excellence IntCDC uses to comply with its reporting obligations, especially to the DFG.