

Application for KLS Young Scientist Program 2020

Application for: Category A (Early Stage Postdoc)

Category B (Experienced Postdoc)

Name of applicant: _____

Institute/Clinic: _____

Date of doctorate: _____

Name of research group leader (KLS-member): _____

Project title:

Project period (mm/yyyy – mm/yyyy): _____

Requested amount of funding (in €): _____