

Sender:



TECHNISCHE
UNIVERSITÄT
DARMSTADT

To the
Department of Human Sciences
Women's Advancement Funds
Committee Alexanderstraße 6
64283 Darmstadt

Application for women's advancement funds for the year 2025

Last Name:

First Name:

Email:

Research associate (WiMi)

ATM

Student

Description of the item/matter to be financed, the objective of the grant and the amount applied for:

I have taken note of the criteria for granting women's advancement funds.

Date:

Signature of requesting party: _____

The financing through cutting costs or third-party funds is secured by the research associate's working/research group.

Date:

Signature of working/research group leader: _____

Appendices:

Confirmation of congress, conference, convention, symposium

Programme of congress, conference, convention, symposium