Postdoc Career and Mentoring Office –   
Application form for the PCMO Postdoc Fund for conferences /   
trainings

Please fill in, sign (electronically) and submit this form with all relevant attachments as **one PDF** **file** to the PCMO ([pcmo@admin.uni-giessen.de](mailto:pcmo@admin.uni-giessen.de)). This version of the application form is valid for funding starting with round 4/2023.

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| 1. Applicant information | |
| Surname | Klicken Sie hier, um Text einzugeben. |
| Name, title | Klicken Sie hier, um Text einzugeben. |
| Faculty, Department/Working group | Klicken Sie hier, um Text einzugeben. |
| Business address | Klicken Sie hier, um Text einzugeben. |
| Home address (required for refund) | Klicken Sie hier, um Text einzugeben. |
| Place and date of birth | Klicken Sie hier, um Text einzugeben. |
| Nationality | Klicken Sie hier, um Text einzugeben. |
| Email address | Klicken Sie hier, um Text einzugeben. |

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| 1. Current position | |
| [Employment](https://dict.leo.org/englisch-deutsch/employment) status | Wissenschaftliche/r Mitarbeiter/in |
|  | Akademischer Rat / Akademische Rätin |
|  | Lehrkraft für besondere Aufgaben |
|  | Other, i.e.: Klicken Sie hier, um Text einzugeben. |
| Head of a junior research group | Yes  No |
| Volume of employment (h/week) | Klicken Sie hier, um Text einzugeben. |
| Expiration date [of](https://dict.leo.org/englisch-deutsch/of) [your](https://dict.leo.org/englisch-deutsch/the) [contract](https://dict.leo.org/englisch-deutsch/contract) | Klicken Sie hier, um Text einzugeben. |

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| 1. Doctorate | |
| Thesis title | Klicken Sie hier, um Text einzugeben. |
| Degree (e.g. PhD, MD) | Klicken Sie hier, um Text einzugeben. |
| University | Klicken Sie hier, um Text einzugeben. |
| Start date – end date | Klicken Sie hier, um Text einzugeben. |

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| 1. Habilitation (if applicable) | |
| Thesis title | Klicken Sie hier, um Text einzugeben. |
| Degree (e.g. PD, Dr. habil) | Klicken Sie hier, um Text einzugeben. |
| University | Klicken Sie hier, um Text einzugeben. |
| Start date – end date | Klicken Sie hier, um Text einzugeben. |

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| 1. Conference / Training details | |
| Title | Klicken Sie hier, um Text einzugeben. |
| Organizer | Klicken Sie hier, um Text einzugeben. |
| Start date / end date of the event | Klicken Sie hier, um Text einzugeben. |
| The following fields need to be filled in for on-site events only. | |
| Venue (city, country) | Klicken Sie hier, um Text einzugeben. |
| Departure / return date | Klicken Sie hier, um Text einzugeben. |
| Place of departure / arrival | Klicken Sie hier, um Text einzugeben. |
| Kilometers travelled (only for trips by private car) | Klicken Sie hier, um Text einzugeben. |
| **Conference** | |
| Type of conference contribution | Symposium, panel, or similar with own talk |
|  | Talk |
|  | Invited talk (please attach invitation) |
|  | Poster presentation |
|  | Other, i.e.: Klicken Sie hier, um Text einzugeben. |
| Has your contribution already been accepted? | Yes (please attach confirmation by the organizer)  No (please submit confirmation by the organizer later) |
| Title of contribution | Klicken Sie hier, um Text einzugeben. |
| Do you take on any other role at the meeting (chairing, etc.)? | Yes: Klicken Sie hier, um Text einzugeben.  No |
| **Training** | |
| Type of training (e.g. workshop, talk) | Klicken Sie hier, um Text einzugeben. |
| Has your attendance already been accepted? | Yes (please attach confirmation by the organizer)  No (please submit confirmation by the organizer later) |

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| 1. Motivation statement (This statement is the main criterion for the evaluation of your application. Please explain thoroughly the benefit of the event for your career development as well as the fit to your current or future research or career profile; max. 300 words) | | |
| Klicken Sie hier, um Text einzugeben. | | |
| 1. Previous funding by the PCMO Postdoc Fund (Maximum of 2 funding confirmations allowed per postdoc!) | |
| Have you been previously funded by the PCMO Postdoc Fund? | Yes, Date:  No |

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| 1. Expenses for the event | | |
| I request funding for: | Amount in euro | in original currency |
| registration fee (please attach receipts) | Klicken Sie hier, um Text einzugeben. | Klicken Sie hier, um Text einzugeben. |
| membership fee (only if mandatory; please attach receipts) | Klicken Sie hier, um Text einzugeben. | Klicken Sie hier, um Text einzugeben. |
| abstract fee (for one abstract only; please attach receipts) | Klicken Sie hier, um Text einzugeben. | Klicken Sie hier, um Text einzugeben. |
| other obligatory fees (e.g. software licenses for virtual events, optional offers will not be reimbursed; please attach receipts) | Klicken Sie hier, um Text einzugeben. | Klicken Sie hier, um Text einzugeben. |
| **Total** | Klicken Sie hier, um Text einzugeben. | Klicken Sie hier, um Text einzugeben. |

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| 1. Travel expenses and travel authorization (for on-site events only) |
| I request funding for: |
| accommodation expenses (80€ for each conference day) |
| travel allowances (see call for applications) |
| Travel authorization form (Reiseanzeige) |
| Travel authorization form was submitted on: Klicken Sie hier, um ein Datum einzugeben.  I did not yet submit the form.  The form is attached.  I will submit the form if the funding is granted.  The travel authorization form cannot be submitted for valid reasons. An explanation is attached.  I acknowledge that the travel authorization form must be submitted in due time before the start of the trip in order to ensure insurance coverage by JLU in the context of a business trip. If in exceptional cases the travel authorization is not submitted because the trip cannot be undertaken as a business trip for valid reasons, the trip may be funded as a private trip and in this case is not insured as a business trip.  If I receive funding from the Postdoc Fund, I will not request further travel expenses for the same trip from JLU.   |  |  |  | | --- | --- | --- | | Klicken Sie hier, um Text einzugeben. |  | Klicken Sie hier, um Text einzugeben. |   Place and Date Signature (signed surname family name): |

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| 1. Other and third party funding |
| Funding from the Postdoc Fund must not be combined with other funding (institutes, etc.).  Have you applied for any other funding or reimbursement for this event (e.g., faculty funds, travel budget, third-party funding, etc.)?  No, I have not applied for any other funding and will not apply for any other funding.  Yes, at Klicken Sie hier, um Text einzugeben.  The application was rejected. The letter of rejection is attached.  Yes. Not yet decided, but applied at Klicken Sie hier, um Text einzugeben.  A proof of the application is attached. If I receive funding by the other party, the PCMO has to be informed immediately. In this case, the postdoc must choose between the funding options. In order to receive funding from the PCMO, a rejection letter from the other party or a copy of the waiver towards the other party must be submitted.  I plan to apply for another funding, at Klicken Sie hier, um Text einzugeben.  I will submit the proof of the application immediately. If I receive funding by the other party, the PCMO has to be informed immediately. In this case, the postdoc must choose between the funding options. In order to receive funding from the PCMO, a rejection letter from the other party or a copy of the waiver towards the other party must be submitted. |

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| 1. Attachments | | |
| To be submitted with your application | | |
|  | attached |  |
| Publication list (see attachment 1 of this document or individually formatted publication list) |  |  |
| Abstract, if applicable |  |  |
| Proof of the duration of the event and the amount of all fees listed under 8. (e.g. screenshot of the event homepage) |  |  |
| Optional: proof of awards or other information that may be useful for assessing your application |  |  |
| To be submitted not later than one month after the end of the event | | |
|  | attached | will be submitted later |
| Copy of PhD certificate (submit with the application if possible) |  |  |
| Acceptance of participation / of your contribution by the organizer |  |  |
| JLU forms: **either** the reimbursement form (for grants without travel expenses) **or** the travel authorization form (*Reiseanzeige*) and travel expense form (*Reisekostenabrechnung*) (for grants with travel expenses)  -> these forms will be checked by the PCMO and then forwarded to the finance department D together with the supporting documents |  |  |
| The travel authorization cannot be submitted for valid reasons. An explanation of these reasons is attached. See point 9. | |
| Proof of all expenses listed under 8. + 9. (event fees, hotel bills, tickets, etc.; if possible in the original currency + proof of payment in euro) |  |  |
| If applicable, proof of (application for) other third-party funding and rejection letter;  If applicable proof of exclusion of funding for conference travel/training for third-party funded positions. |  |  |

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| 1. Applicant acknowledgement and declaration | |
| I acknowledge that | |
|  | ...only applications that include the required attachments to be submitted with the application can be evaluated (see 11.). |
|  | ...only applications for which all required attachments and receipts have been submitted without further request by no later than one month after the end of the event can be funded. In case of missing documents or receipts after that date, financial support will not be provided. |
|  | ...the call of the PCMO for the Postdoc Fund and the conditions stated therein apply. I accept the conditions stated in the version valid at the time of the application deadline. |
|  | ...in case of funding, I agree to participate in evaluations of the funding program by the PCMO. I give my consent to the PCMO to be contacted for this purpose. |
|  | ...my supervisor must approve my participation in the (virtual) event in the context of a business trip and/or within working hours. If the event takes place outside of working hours or the trip does not take place as part of a business trip, because the participation serves personal development but is not in the interest of the employer, there is no insurance coverage through JLU. |
| Moreover, I hereby confirm the accuracy of my declarations. | |

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| Klicken Sie hier, um Text einzugeben. |  | Klicken Sie hier, um Text einzugeben. |

Place and Date Signature (signed surname family name)

Attachment 1: Publication list (max 10 publications from the past 5 years, including this year)

Instead of the attachment, an individually formatted publication list can also be submitted.

|  |  |  |  |
| --- | --- | --- | --- |
| Reference | Type of publication  (Article in scientific journal, book chapter, monograph, conference proceedings, other) | Peer Review | |
| Yes | No |
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