

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **UM – York Collaboration Fund** | | | | |
| **APPLICATION FORM**  *Please complete this form and send electronically as one PDF to Ms Nicole Kusters, (*[*nicole.kusters@maastrichtuniversity.nl*](mailto:aisling.tiernan@maastrichtuniversity.nl) *)* | | | | |
| Proposed Project Title: | | | | |
| Proposed Start and End Date: | | | Duration of Proposed Visit: | |
| **1. Applicant’s Details** | | | | |
| Title: | First name: | | | Surname: |
| Department or School: | | |  | |
|  | | | Telephone Number: | |
| Email: | |
| **2. York Co-Applicant** | | | | |
| Title: | First name: | | | Surname: |
|  | | | | |
| Co-Applicant’s Department or School: | | | Position: | |
| Host’s Address: | | | Telephone Number: | |
| Email: | |
| **3. Please provide a summary of the proposed activity. (500 words max)** | | | | |
|  | | | | |
| **4.** **What is the timeline of events for the proposed activity?** | | | | |
|  | | | | |
| **5.** **Please outline the aims and objectives of your proposed activity. (1000 words max)** | | | | |
|  | | | | |
| **6.** **What are the expected results and added value for the host institution/department/faculty and how will this activity foster the partnership between York and UM? (1000 words max)** | | | | |
|  | | | | |
|  | | | | |
| **7.** **Please list the names of additional UM staff members involved in this activity** | | | | |
| **1.**  **2.** | | | | |
| **8.** **Please list the names of additional York University staff members involved in this activity** | | | | |
| **1.**  **2.** | | | | |
| **9. Which area/s of strategic importance does your visit align with?** | | | | |
| 1. Agrifood | | | | |
| 1. Imaging | | | | |
| 1. Europe in a globalising world | | | | |
| 1. Global South | | | | |
| 1. Knowledge Partners – Data Science | | | | |
| 1. Other (please state) | | | | |
| **Please Attach the following documents to the request form:**   1. **Letter of support from relevant faculty dean or head of department regarding the proposed activity** 2. **Budget Template** 3. **A detailed timeline for the implementation of the project** | | | | |
| **11. Statement from Applicant** | | | | |
| I wish to apply for UM – York partnership fund.  If successful, I undertake **to provide a final report within one month of the end of activity to Ms Nicole Kusters (**[**nicole.kusters@maastrichtuniversity.nl**](mailto:aisling.tiernan@maastrichtuniversity.nl)).  I agree that the Maastricht University and York University may hold and process personal information in connection with this application and may use information relating to this proposed activity for any publicity purposes that they deem appropriate. | | | | |
| **Signed:** | | **Date:** | | |