Hematology Research Physician-Scientist Fellowship Award

Application for support to the Jacques and Gloria Gossweiler Foundation

<u>Basic data</u>

Type of Application	☐ first application or	prolongation
Applicant Surname/First Name Address:		
Principal investigator of research project:		
Head of institution (ensuring the financial, material and personal resources):		
Institution Street / No. Zip code / City Phone / e-Mail		
Beginning of fellowship:		
Length of fellowship:		
Other financial sources (including amount in curr.)		
Name of research project:		

I hereby certify the accuracy of all information in this application (including enclosures).

Place, Date

Signature(s)

Please send the application to info@jggf.ch or Jacques & Gloria Gossweiler Foundation, Taubenstrasse 8, Postfach, CH-3001 Berne

Budget form of project

Currency: CHF

	Year 1	Year 2	
JGGF AWARD			
Salary gap for grantee financed by: - Institution - other			
Personnel (Salaries)			
Expenses for			
 Research material (e.g. hardware /software etc.) for development of research material 			
Patient related costs (compensation and travel of patients)			
Travel (researchers at- tending conferences)			
Overhead			
Other costs			