



## INSIGHTS GRANT APPLICATION FOR CONFERENCE PRESENTATIONS AT ACADEMIC EVENTS

APPLICANT	
Name	
Affiliation	
Email Address	
DETAILS OF THE SCIENTIFIC EVENT	
Name / Title	
Host institution / Organizer	
Place	
Date of the presentation	
Title of the presentation	
PROPOSED EXPENDITURE	
Registration fee	
Travel	
Accommodation	
Other (please specify)	
Total amount of funding applying for	
Additional funds contributed by other sources (please specify)	

I have added my presentation to this application.

DATE:

\_\_\_\_\_  
Applicant signature

Please submit the completed and signed form together with the paper you will be presenting to [insightsoffice@wzb.eu](mailto:insightsoffice@wzb.eu).

I will spend the approved funds for the purpose I have described above, and I will abide by the rules and regulations of the WZB Social Science Center Berlin regarding the use of research funds.

I agree to prepare a contribution to one of the INSIGHTS communication outlets in coordination with the INSIGHTS Team after the academic event.

I will follow the PROMOTION guidelines for conference presentations.