

Connecticut-Baden-Württemberg Faculty Mobility Program 2019

Application Form

Please complete all sections of this form. In addition, we ask you to provide a CV and a list of publications.

Personal data

Family Name

Given Names

Home Institution

Home Department and Faculty

Present Rank

Full mailing address

E-Mail address

Phone

Brief description of proposed visit

(max. 200 words)

Faculty Visit

Proposed Host University/Universities

Proposed Host Professor(s)

Proposed Host Institute(s)/Department(s)

Proposed Start Date

Proposed End Date

Signature _____

Date _____