



International Graduate School for Neuroscience (IGSN) – Ruhr University Bochum (to be submitted to the Secretary of the IGSN – FNO 1/116)

<u>Name</u>
Name and location of the Laboratory to be visited:
Purpose of Laboratory visit:
Name, location, date of the Conference to be attended:
Dates of travel and duration of stay:
Estimated costs (accommodation, registration fees, flight):
<u>Abstract</u>
Signature PhD Students Supervisors

Completed application form	
Abstract for conference attendance	
Meeting programme	
Written support of supervisor	
Confirmation by the host laboratory if lab visit is intended	
Proof that the travel costs (flight train etc were the most economical possible)	

Tick here