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Application for the Research Award 2024 of the Initiative Gehirnforschung Steiermark

Last name:		First name:
Date of birth:		Place of birth:
Professional tit	tle with/with	nout academic degree:
Institution:		
Private	Street:	
address	Postcode/P	Place:
	Phone:	
	E-mail:	
Business address	Street:	
	Postcode/F	Place:
	Phone:	
	E-mail:	
	Web:	
Information al	bout your sc	ientific work:
University/Institute:		
Denartment(s):		

Title of scientific work:			
Completion date:			
Type of work:	diploma-/master thesis	dissertation	publication
Keywords:			
Publications:			
eligibility are in addition t	rk and description of the relation oscientific quality and innovation ive to address these points:		
	ine to dudicess these points.		

Are you already a member of INGE St.? (mark with a cross where applicable):						
yes	no	☐ I would like to become a member of INGE St.				
will be processed a and will be passed consent can be reve	nd, in case of receiving a on exclusively to the Land	(DS-GVO) I agree that the above-mentioned personal data research prize, both published on the website of INGE St. d Steiermark as the funding body of the INGE St. This admin@gehirnforschung.at. The revocation does not affect int.				
Place, date:		Signature:				