Please submit the filled form to		n for Travel/Reiseauftrag	
PRISMA ⁺		nts of PRISMA+ (if on TV-L you need to	o fill "Reiseantrag" as well)
	Germany		a ha prover later
PRISMA+ Cluster of Excellence	Purpose of T		o be proven later)
Staudingerweg 9 _(Raum 02-428) 55128 Mainz	Conference Secondment	Poster Talk	
E-Mail: prisma@uni-mainz.de	Mentor visit	Other:	
	Summer/Winte		
	Gammen/Wind		
Last Name, first name of applicant			
Institute, institution of applicant		Group Leader	
	- F. 41 F- 11		
Herby I apply for approval of financial support	of the following tra		
		Name of event/conference/school	eic.
a) b) fro	om:	until	
· /	ates of travel)		
	,		
fro	om:	until	
Country (Be	eginning and end of dut	ies)	
c) Payee Kostenträger:		Kostenstelle:	
Abrech.obj.:		FiBu: 68523	o be filled by PRISMA⁺
d) Expected costs in Euro			
a) Expected costs in Euro			
Total (in EUR)	Please attach	a detailed list to your application	
e) Bank Details and signature of applicant			
Bank name	Account number	Sort code (BLZ)	
Data and airpoting of any "		I would like to apply for a	n advance payment
Date and signature of applicant		(Abschlag)	
f) Approval by PRISMA Coordination Office			
, , , ,			
Application granted without daily allowanc	e (Tagegeld)		
Application granted with daily allowance (
Application granted with the following exce	·		
	eason(s):		
Advance payment granted An	nount:		
	-	—	
Last Name, first name (places print)	<u> </u>	Date and signature	
Last Name, first name (please print)		Date and signature	