



Application for research grant from the KI Foundation for coagulation research

Applicant

First Name	Last Name
Date of Birth	Gender <input type="checkbox"/> Female <input type="checkbox"/> Male
E-mail	
Phone number	

Academic title	Year of dissertation
Department	Unit

Purpose

The application considers:

- Stipend
- Allowance for wringing or improving information material
- Allowance for organizing a conference

Amount applied for (SEK)

Project Title

Attachments

- Application Letter
- Certificate of PhD registration
- CV
- Publication list
- Research Plan, maximum 3 pages including references



**Karolinska
Institutet**

Signature	Date and place
Name in block letters	