

commitment form (4)

FAC SIMILE – to be signed by the director of the non-mathematics department

I, the undersigned Prof. ...ssd.....,
Director of the Department
of the University of Bologna,

having received a request from (applicant full name), Ph.D.
student/postdoc/Researcher
to perform a research visit to
from to (dates format: dd/mm/yyyy) on the GHAIA project,

DECLARE

that I authorize the visit.

In addition, I declare that (applicant full name)

- will have been employed at this Department/CNRS for more than 6 months at the beginning of the visit abroad;
- for the duration of the visit, he/she will remain member of the University of Bologna/CNRS and will keep his/her position in his/her home institution,
- after the visit abroad he/she will return in his/her home organisation with the same position as before.
- The MCSA scholarship is compatible with the other fundings he will receive during the visit abroad. In particular he/she is committed to devote him/herself full-time to the GHAIA activities during the visit abroad period;

Director of the Department
