



2.Project Title



3. CURRICULUM VITAE AND SCIENTIFIC REFERENCES
(max 3 pages)



5. LOCAL HOSTING SCIENTIFIC INSTITUTION

5.1 Data on the scientific institution

NAME: _____

ADDRESS: _____

CITY: _____

5.2 Professor supervising the project for the local scientific institution (show email address and telephone number):

E-MAIL ADDRESS: _____

TELEPHONE NUMBER: _____

In case of approval and enforcement of the contract as Lagrange Fellow of the Lagrange – CRT Foundation Project, the scientific institution commits to:

- **make available, over the period of time envisaged in the contract, all structures needed for the development of the selected project in full respect and compliance with the existing and effective norms disciplining such matter;**
- **to pay directly to the researcher the amount of Euro 1.500,00 (gross of withholding taxes as per law)**

STAMP AND SIGNATURE
