Letter of Support





Funding line: Support for independent research activities

Turiding line. Support joi www.perweew	Tesewien wemmes
Supervisor (Title, First name, Last and Surname)	
Contact (Institution, a	ddress at the University of Bamberg, Email)
Applica	ant (Title, First name, name)
that working time and/or workplac	is applying for funding from the Academic Equal bendent research activities. I support this application and agree the infrastructure will be used for the preparation and/activity. Furthermore, I am aware that the funds provided
	Science is limited to a maximum of €1000.
	ed by the Academic Equal Opportunities Office may be used via vill only be used for the purpose mentioned in the application.
Signature of supervisor	