Application form

TALENTUD research fund[[1]](#footnote-1)

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| --- |
| Name:  Major:  Neptun code:  Research topic:  Supervisor:  Required amount[[2]](#footnote-2):  Please write down for what are you going to use the money:  Date:  Supervisor’s signature Applicants signature |

|  |
| --- |
| I support I decline  Amount:  talent coordinator  UD Faculty of Pharmacy |

1. Please fill out with capital letters! Please send the filled document to: mandy.zsuzsanna@unideb.hu [↑](#footnote-ref-1)
2. All costs must be covered with bills (and/or tickets) Billing address: Debreceni Egyetem, 4032 Debrecen, Egyetem tér 1. [↑](#footnote-ref-2)