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| To ITMO University’sFirst Vice RectorDaria K. Kozlova |

APPLICATION

Kindly consider my application for partial reimbursement of the registration fee for my participation in the following online event.

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| Student: | I am studying in an international education program (IEP) yes no(the list of all IEPs can be found [here](https://en.itmo.ru/en/page/310/International_Master%27s_Programs.htm)) |
| name, surname |  |
| phone, e-mail |  |
| student group number |  |
| education program |  |
| thesis topic (if applicable) |  |
| Name, surname of scientific advisor (if applicable) |  |
| Name of the online event with a direct link to its website |  |
| Purpose of participating (presentation or report topic, if applicable) |  |
| Event’s location: |  |
| country, city |  |
| university |  |
| Event’s dates: |  |
| starting on |  |
| ending on |  |
| Grounds for participating\* | invitation from the hosting party |
| Costs estimate *(in the currency of payment)*: |  |
| registration fee |
| Source(s) and amount of co-funding*(the amount of co-funding should constitute no less than**30% of the costs estimate)*: |  |

*\*The invitation from the hosting party and the program of the event should be enclosed to the application.*

I commit to sending the documents for partial reimbursement of expenses to short-term@itmo.ru within three working days after the end of the online event.

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| Student  |  |  |
|  | *(signature)* | *(name, surname)* |
| APPROVED |  |  |
|  |  |  |
| Head of education program |  |  |
|  |  *(name of the program)* | *(signature)* | *(name, surname)* |
| Head of work unit at ITMO (if applicable) |  |  |
|  |  *(name of the unit)* | *(signature)* | *(name, surname)* |