## **C M Lerici Foundation**

## SCHOLARSHIP APPLICATION

## **Applicant**

Street address			
City Postal code Country			
Email Phone			
Current studies			
Current level of studies			
☐ Secondary school ☐ Bachelor ☐ Master ☐ Doctoral ☐ Other			
Current program Specialisation (if applicable)	Specialisation (if applicable)		
Home institution (in home country)  Name of referee (professor, tutor, etc.)			
Purpose of visit			
Field of study			
☐ Architecture ☐ Art ☐ Economics ☐ Engineering ☐ Humanities ☐ Law ☐ Music ☐ Social sciences ☐ Science	□ Other		
Host institution (in host country)			
Period of the visit			
Project description  Project description			

## Scholarship budget

Air travel (between Italy a	nd Sweden)	Cost (SEK)
Insurance		Cost (SEK)
Course fees, etc. (in host	country)	Cost (SEK)
(		,
Housing (in host country)		Cost (SEK)
Other costs specific to the	project (explain below)	Cost (SEK)
	Total amount applied for	
Explanation of "Other cos	ts" and other comments on the budget	
	· ·	
Previous scholarshin	s received from the CM Lerici Foundation (if any)	
	s received from the CM Lerici Foundation (if any)	
Previous scholarship	s received from the CM Lerici Foundation (if any)  Amount	
Year	Amount	
Year	Amount	
Year	Amount	
Year Year Signature	Amount	
Year	Amount	
Year Year Signature	Amount	
Year Year Signature	Amount	
Year Year Signature Date	Amount	
Year Year Signature Date	Amount	

In compliance with EU General Data Protection Regulation (GDPR), I hereby authorize you to use and process my personal details contained in this document.

I hereby authorize your publication of the final report on the C.M. Lerici Foundation website.