

Proposal Submission Form



EUROPEAN COMMISSION
6th Framework Programme on
Research, Technological
Development and Demonstration

Marie Curie Mobility Actions

**Marie Curie Host Fellowships
for the Transfer of Knowledge
(ToK)**

A2

Proposal Nr Proposal Acronym Participant Nr

Information on Organisations

Participant organisation		Christian-Albrechts Unversitaet zu Kiel					
Org. legal name							
Org. short name		CAU Kiel					
Legal addr.	PO Box		Postal Code	D24098	Cedex		
Street Name and Nr		Ludewig-Meyr str. 4					
Town	Kiel			Country	Germany		
Internet home page	http://www.math.uni-kiel.de						
Activity Type	Higher Education	Legal Status	GOV	If "PRC",specify			
Is the organisation a Small or Medium-Sized Enterprise (SME)?						No	
Is the organisation situated in a Less-Favoured Region within the EU?						No	
Name of Less-Favoured Region							
Any dependencies between the organisation and (an)other participant(s)?						No	
If yes,part.nm	<input type="text"/>	short name	<input type="text"/>	Character of dependence			
If yes,part.nm	<input type="text"/>	short name	<input type="text"/>	Character of dependence			
If yes,part.nm	<input type="text"/>	short name	<input type="text"/>	Character of dependence			
Scientist in charge	Title	Prof.		Sex	Male		
Name	Koenig						
First name(s)	Herman						
Department/Faculty/Institute/Laboratory name							
Mathematisches Seminar							
Address (if different)	PO Box		Postal Code		Cedex		
Street Name and Nr							
Town				Country			
Phone1	+494318802775		Phone2		Fax	+494318804091	
e-mail	Hkoenig@math.uni-kiel.de						
Internet home page	http://analysis.math.uni-kiel.de/koenig						
Previously submitted similar proposals or signed contracts?						No	
If yes,prg and year							
If yes, proposal or contract number(s)							