**Application**

**Foundation Associate Professor Ragna Lorentzen Foundation**

Use block letters

|  |
| --- |
| **Full name of applicant:**  |
| **Danish CPR no./date of birth:** | **AU-ID (if you are enrolled at AU):** |
| **Nationality**:

|  |
| --- |
|  |

I have Icelandic citizenship.

|  |
| --- |
|  |

I am from Greenland or Faroe Island

|  |
| --- |
|  |

I have neither Icelandic nor Danish citizenship | **Contact:** Road: Postcode:CityCountry:E-mail (AU-mail, if you have it):Private telephone: |
| **Bank:** If bank account in Denmark indicate which bank as well as Reg. and account no:  If Foreign Bank, state IBAN/Fedwire/ABA or similar as well as Reg. and account no:   |
| **Ordinary students:** If you are/expect to be enrolled as a full-time student on an ordinary Bachelor's or Master's degree program at DPU, please specify the start date and which program | Start-up date: Expected end date:Education:  |
| **Exchange students:** If you are on/applying for a study period (Erasmus, Nordplus, other exchange programmes, PhD gueststudent) at DPU, please indicate which program you are currently studying/will be taking courses on  | Enter your home institution and the name of the education: Enter the relevant DPU program:Start date:Expected end date:   |
|  |
| Amount applied for from Ragna Lorentzens Foundation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DKKSought or received support from other sources (SU not included) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DKKThe amount is applied for during the period:\_\_\_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(You can apply for the grant for max. one year) | Previously received support from Ragna Lorentzen's FoundationAmount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DKKThe amount was allocated for the period:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Enclose documentation of income in the form of the latest annual statement/tax return, advance statement for the current year (only applies to applicants residing in Denmark at the time of application) and budget for the period for which the grant is sought. Budget form must be used: See the notice of the grant. |
| Reasons for application (must include an explanation that the applicant is worthily needy, as well as how an award of scholarship will support the applicant's education at DPU): (max 1 page) |
| Date: | Place: | Signature\* |

Please note, when awarding a grant, relevant information, including CPR number, is disclosed to the grant's bank, Danske Bank, and Skat. You can read more about [Danske Bank's processing of personal data here](https://danskebank.dk/-/media/pdf/danske-bank/dk/erhverv/conditions/terms-and-conditions/privacy-notice--other-types-of-businesses-than-sole-proprietorships-pdf.pdf?rev=ff663dc25deb47828df8f80fc2fd028f&hash=1953FB05A14ABDAB9110CA3937EEAFF7).