DECLARATION OF ACCEPTANCE

The Declaration must be submitted via the DAAD portal (using the "Declaration of Acceptance" option) as soon as possible, at the latest within four weeks. The Scholarship Award only becomes effective when the DAAD has received your Declaration of Acceptance on time.

Section ST24

Surname: Carrière
Name: Mathieu
Personal ref. no.: 91647425

Scholarship programme: Research Grants - Short-Term Grants, 2017

Details of the scholarship according to the Letter of Award:

Start of funding	End of funding	Destination country	Institution
01/04/17	30/04/17	Germany	Technische Universität München (TUM)

I accept the scholarship on the basis of the conditions known to me, and as particularly specified in the brochure "Ihr DAAD-Stipendium/Your DAAD-Scholarship". I promise that I will fully meet any obligations that arise from this scholarship agreement.

I am aware that the Letter of Award will only become effective and the scholarship payments are only made if this Declaration of Acceptance is submitted to the DAAD on time.

Important information on health insurance with Continentale Krankenversicherung AG for all scholarship holders whose scholarship also includes payment of health insurance costs by DAAD:

DAAD's private group insurance contract with Continentale Krankenversicherung AG does not provide insurance cover for the following insurance cases if these began prior to the start of the insurance.

insurance cover for the following insurance cases if these began prior to the start of the insurance period: HIV, multiple sclerosis, haemophilia (blood disease), malignant tumour (cancer), including leukaemia, and chronic kidney diseases, or the elimination of cosmetic defects or treatment of anomalies.

Continentale Krankenversicherung AG is under no obligation to pay benefits for childbirth within 8 months from the start of the insurance period. The obligation to pay benefits exists only for deliveries that occur from 9 months after the start of the insurance period.

I confirm that I have taken note of the information and in the event that one of the above preexisting conditions exists or begins between acceptance of the scholarship and start of the scholarship period, I shall notify my DAAD contact immediately. DAAD shall then decide whether another form of insurance coverage can be provided. Please also let us know if you require special assistance during your stay in Germany as a result of a chronic illness or disability.

This also applies to the spouse and children of holders of scholarships of more than 6 months, who join the scholarship holder in Germany. The spouse and children must remain in Germany for at least 3 months.

This declaration of intent becomes effective and legally binding upon dispatch. Moreover, I hereby

confirm that the details I have provided are correct.