

Application for grants

Project coordinator / Contact person:

Managing body / Person: (1)

Teleph:

Organization nr/personnr:

E-mail:

Co-applicants (contact information in project description):

Project title (2)

Translation of project title to Swedish

Summary description of the project (aim/purpose, implementation, significance/importance) (3)

Keywords (4)

Summary of costs per year applied for **at Ekhagastiftelsen** (5) Amounts to be stated in SEK (Swedish Krona)
 – detailed budget to be submitted as part of the project description.

Period	Salaries	Equipment/material	Travel	Other	Total
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Total applied for at Ekhagastiftelsen

Have applications been submitted in previous years?

If yes, state reference number and if granted

Yes Yes, but different project No

Funds granted or requested from other organizations (6)

Name of organization	Applied amount	Granted amount	Period (year-month)
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Project planned to start/started (year-month-day)

Project planned to finish (year-month-day)

Ways in which findings from the project will be published

If applicable: Ethical review/vetting - Has permission from ethical committee been received?

Yes (enclosed)

No

If No: Has it been applied for?

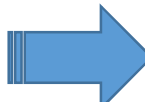
Yes

No

Summary information about other submitted material which the applicant wishes to refer to

Place and date	If applicable: Signature of department/faculty head (7)
Signature of applicant	

The applicant is aware of and approves that all information from the application may be stored in a computer database. The applicant further approves that the foundation may publish the applicants name and summary project description as well as project reports on the website of the foundation on the internet.

 Save the filled in application form (without signatures) and send it together with the project description and application data sheet by e-mail to Ekhagastiftelsen. Also send a printed and signed application form by regular mail to Ekhagastiftelsen.