**AARHUS UNIVERSITY**

**RESEARCH FOUNDATION**

**CVR NO. 10 46 61 05**

 **REPORT FORM**

***To be sent to:*** ***auff@auff.dk*** ***or***

***Aarhus University Research Foundation***

***Finlandsgade 14***

***8200 Aarhus N***

|  |  |  |
| --- | --- | --- |
| 1 | Name of the grant recipient |  |
| 2 | PositionEducationAcademic degrees |  |
| Current place of work and phone number  |  |
| Place of work during the execution of the project |  |
| Private address and phone number |  |
| 3 | Names of other project participants, if any |  |
| 4 | Date of grant |  |
| File number |  |
| Title of the project (no more than 20 words) |  |
| 5 | Amount granted by the foundation | DKK End of the grant (cf. Guidelines for the use of grants, section 2.3)End date of the grant: Expected end date of the grant: |

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|  |  |
| --- | --- |
| 6 | Summary of the progress and financial situation of the project:A description of no more than 2 A4 pages may be attached.Any completed publications must be attached. Publications completed after the reporting must be submitted separately, specifying the file number of the grant. |
| 7 | List of attachments, if any:  Description  Publications   |
| 8 | The Aarhus University Research Foundation reserves the right to request that a grant recipient produces a short article on the results of his/her research for use in the preparation of the annual report of the foundation. |
| 9 | Date Signature  |

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