



NARODOWA AGENCJA WYMIANY AKADEMICKIEJ

**Application**  
**to the Prof. Franciszek Walczak Programme – supporting the mobility of scientists – specialists**  
**specialists in the area of cardiology, oncology, allergology and infectious diseases**

**General information**

Prior to completing this form, please read the Rules of the Programme published on [www.nawa.gov.pl](http://www.nawa.gov.pl).

Prior to sending the application, please check carefully its completeness and completeness of all required annexes.

**I. Applicant**

1.1	Applicant first name	
1.2	Applicant last name	
1.3	Gender	
1.4	Applicant date of birth	
1.5	Identity card / passport number	
1.6	PESEL	
	<b>Applicant residence address:</b>	
1.7	Street	
1.8	Building number	
1.9	Apartment number	
1.10	Postal code	
1.11	City	
1.12	Voivodeship	
	<b>Applicant correspondence address</b>	
1.13	Street	



NARODOWA AGENCJA WYMIANY AKADEMICKIEJ

1.14	Building number	
1.15	Apartment number	
1.16	Postal code	
1.17	City	
1.18	Voivodeship	
	<b>Applicant Contact Details</b>	
1.19	Applicant phone number	
1.20	Applicant email	
	<b>Status of the Applicant</b>	
1.21	I am a holder of at least a doctoral degree	
1.22	Academic degree/title held	
1.23	Date of obtaining the last academic degree/title	
	<b>Information about the workplace of the Applicant</b>	
1.24	Type of entity	
1.25	Name	
1.26	Unit, department or any other organisational unit	
	Registered address	
1.27	Street	
1.28	Building number	
1.29	Apartment number	
1.30	Postal code	
1.31	City	
1.32	Voivodeship	

1.33	Position/function	
1.34	Type of employment	
	*Contract for a definite period of time until	
	**Information about the civil-law contract (major duties)	
	<b>Contact person at the parent unit who can confirm the information about employment</b>	
1.35	First name	
1.36	Last name	
1.37	Position	
1.38	Email	
1.39	Phone number	
	<b>Other information about the Applicant</b>	
1.40	Command of English (at least C1 proficiency level is required)	
1.41	Command of other foreign languages	
1.42	Citations (excluding self-citations) according to the database;	
1.43	List of completed and implemented research projects, indicating international projects, a source of financing and the role of the Applicant in the project;	
1.44	List of publications published during the last 5 years prior to submitting the application;	

**Annexes:**

- scientific CV of the Applicant – **not more than 3 pages**;
- copies of **major publications** of the Applicant (in the original language), while in the case of monographs it is required to attach a file containing a cover page, editorial page, table of contents and a selection of excerpts containing the most important theses by the author;
- scanned document proving holding an academic degree **or** scanned resolution of the faculty/college board on starting a doctoral degree programme or scanned university letter informing about and providing the date of starting a doctoral degree programme;

- (if applicable) scanned document proving the possession of a PhD student status **issued with the current date;**
- (if applicable) certificate confirming employment and its form in the parent unit **issued with the current date;**
- information about the planned manner and the possible use by the parent unit of the skills and knowledge gained by the project participant **signed by the manager of the unit;**
- (if applicable) scanned document certifying that the institution is an organisation conducting research and disseminating knowledge within the meaning of Article 2(83) of the Commission Regulation (EU) No 651/2014 of 17 June 2014 declaring certain categories of aid compatible with the internal market in application of Articles 107 and 108 of the Treaty, e.g. statutes (if Applicant is employed in the scientific unit referred to in Article 7(8) of the Act on higher education and science and having a scientific category).

## II. Host centre

2.1	Name of a foreign host centre	
2.2	Unit, department or any other organisational unit	
	Registered address:	
2.3	Country	USA
2.4	Street	
2.5	Building number	
2.6	Apartment number:	
2.7	Postal code:	
2.8	City	
2.9	State	
2.10	Brief description of the host centre, including its special achievements (for example: important position in global ratings, recognised accreditations, prestigious awards)	
2.11	Substantiation for the selection of the host centre	

	Contact person in the host centre who may confirm the willingness to establish cooperation and accept the NAWA scholar for a requested period of time:	
2.12	First name	
2.13	Last name	
2.14	Position	
2.15	Email	
2.16	Phone number	

**Annexes:**

- scanned invitation from the host centre, confirming the willingness to establish cooperation and accept the NAWA (the Polish National Agency for Academic Exchange) scholar for a requested period of time, along with providing a possibility of implementing tasks described in the application, together with the contact details of the centre

**III. Information about the project planned for implementation in the host centre**

3.1	Project title	
3.2	Key words (no more than 5)	
3.3	Project start date	
3.4	Project end date	
3.5	Project classification according to the OECD classification of fields of science and technology (minimum one and maximum three indications are possible)	
3.6	Please justify how the project is compliant with the thematic scope of the programme (oncology, cardiology, allergology and/or infectious diseases). Please justify.	

3.7	<p>Activities to be carried out in the project (according to the part 1.4 of the Programme Regulations)</p>	
3.8	<p>Description of activities to be carried out in the project (with reference to point 3.7 of the proposal)</p> <p><i>[Detailed description of the planned activities in terms of the chosen discipline: cardiology, oncology, allergology and/or infectious diseases including:</i></p> <ul style="list-style-type: none"> <li>• <i>general objectives,</i></li> <li>• <i>specific objectives,</i></li> <li>• <i>description of the problem to be solved,</i></li> <li>• <i>description of tools and/or research/didactic methods, etc.]</i></li> </ul>	
3.9	<p>Project results (with reference to points 3.7 and 3.8 of the proposal)</p> <p><i>[Description of planned results of the project (with reference to points 3.7 and 3.8 of the proposal)].</i></p>	
3.10	<p>The importance of project implementation for the development of the discipline, including the degree of innovation of planned research and/or activities</p>	
3.11	<p>Expected impact of participation in the programme on the further scientific/academic development of the Applicant and on the</p>	

	development of the scientific field/discipline (in terms of organisation of work, procedures, treatments, techniques, processes, technologies, tools, resources, systems and other activities for the prevention, diagnosis and therapy of cardiovascular diseases, tumours, allergies and/or infectious diseases)	
3.12	Measurable effects of Applicant's participation in the programme. A plan to implement the acquired knowledge and skills in the Applicant's home unit	

#### IV. Project schedule

No:	Planned activities:	Start date:	Start date:
1			
2			
3			

#### V. Budget

##### 5.1 Subsistence expenses

Subsistence costs (PLN):

##### 5.2 Mobility allowance

Mobility allowance (PLN):

##### 5.3 Total (5.1 + 5.2)

--

## VI. Declarations

1. Informacje zawarte w powyższym wniosku są zgodne ze stanem faktycznym. Jestem świadomy/a odpowiedzialności karnej wynikającej z art. 271 Kodeksu karnego, dotyczącej poświadczania nieprawdy co do okoliczności mającej znaczenie prawne.
2. Planowane koszty wskazane we wniosku nie są finansowane ze środków pochodzących z innych źródeł i Wnioskodawca nie ubiega się o ich finansowanie z innych źródeł.
3. Nie zostałem/am skazany/a prawomocnym wyrokiem za przestępstwo związane z działalnością zawodową, naruszeniem etyki zawodowej lub nie zostałem/am ukarany/a za poważne wykroczenie zawodowe.
4. Nie ciąży na mnie prawomocny wyrok dotyczący oszustwa, korupcji lub innych niezgodnych z prawem działań skutkujących powstaniem jakiegokolwiek szkody czy zagrożenia.
5. Nie dopuściłem/am się umyślnie lub przez zaniedbanie nieprawidłowości w wykonaniu kontraktów lub projektów finansowanych lub współfinansowanych ze środków publicznych.

I agree

6. Zgoda na przetwarzanie danych osobowych  
Potwierdzam zapoznanie się z zasadami ochrony danych osobowych, wskazanymi w regulaminie Programu im. Walczaka.  
Potwierdzam zrealizowanie wobec osób, których dane zostały przekazane w ramach niniejszego wniosku, obowiązku informacyjnego - poprzez przekazanie zasad ochrony danych osobowych, wskazanych w regulaminie niniejszego Programu.

I agree