**Appendix No. 2** Regulation for granting foreign internships for PhD students studying at the Doctoral School of the University of Life Sciences in Lublin under the STER NAWA Program „Actions towards the internationalization of the Doctoral School of the University of Life Sciences in Lublin (I-SDUPL)”

Data złożenia wniosku

………………………………..

Zarejestrowano:

………………………………..

 (podpis)

**Application for the foreign mobility being a part of I-SDUPL project**

**of STER NAWA Program**

**PART I: to be filled in English by the Applicant**

**1. Basic data of the Applicant**

|  |
| --- |
| **Name and Surname** |
|  |
| **Permanent residence address:** |
|  |
| **Phone number, e-mail and temporary residence address:** |
|  |
| **Current year/semester of education at USL Doctoral School** |
|  |
| **Scientific discipline(s) of the Applicant**  |
|  |
| **Full name of the supervisor/supervisors**  |
|  |
| **Full name of the auxiliary supervisor (*if applicable*)** |
|  |
| **Organizational unit of the Applicant** |
|  |
| **Proposed title of doctoral dissertation**  |
|  |

**2. Basic data of the planned internship**

|  |
| --- |
| **Planned mobility type**  |
|  one month in country from OECD or from the top 50 of the MERCER report three months in country from OECD or from the top 50 of the MERCER report six months in country from OECD or from the top 50 of the MERCER report two months in country outside the OECD  |
|
| **Planned beginning date of internship** | **Planned ending date of internship** |
|  |  |
| **Country of the host institution** |
|  |
| **Full name of the host institution (*please attach an official letter of support signed by the mentor*)\*** |
|  |
| **Name of the unit where the internship will be completed (*institute, lab, etc.*)** |
|  |
| **Full name of the prospective mentor (*incl. degrees, titles and position e.g. professor, associate professor, lecturer*)** |
|  |
| **Level of knowledge of the language(s) in which the internship will be taken (please attached copy of the language certificate or a declaration of knowledge of a foreign language signed by Applicant**) |
|  |

**\***Letter should include the following data: name of host institution; name of host department/laboratory/unit; mentor’ name, surname, research title, position; dates of internship; general information on the activities undertaken by applicant during the Internship; signature of mentor and other responsible bodies if required by host institution, stamp of the host institution if available

**3. Main evaluation criteria**

|  |
| --- |
| **A. Description of the planned research activities in hosted institution (max. 3,000 characters including spaces)** |
|  |
| **B.** **Rank of the host institution and the mentor** |
| Description of the host institution including *reputation and scientific level of institution, international recognition and relevance of the achievements to the discipline of the Applicant,*  *short justification for the choice of the host institution/research unit in the context of the research planned in the project; link to the web site of the host institution* (max. 1500 characters including spaces); |
|  |
| Description of the mentor including *Mentor scientific position and international recognition in the discipline, the most important scientific achievements of the Mentor, the number of citations and Hirsch index of the mentor, consistency of the scope of Mentor research with the research planned by Applicant, link to the web site presenting Mentor scientific achievements ( if applicable)* (max. 1500 characters including spaces) |
|  |
| **C.** **Description of the planned scientific results of the internship** including *scientific publications, participation in conferences, workshops, joint applications for research projects, possible long-term results of the cooperation with the host institution* (max. 3000 characters including spaces) |
|  |

**4. Additional evaluation criteria**

**Bibliographic indexes**

|  |  |  |
| --- | --- | --- |
| Total 5-year impact factor of journals in which Applicant published  | H-Index (according to Scopus and Google Scholar) | Total number of citations (without autocitations) based on Scopus and Google Scholar |
|  |  |  |

**Hereby I declare that I will use the scholarship received solely to cover my stay and travel costs.**

|  |  |
| --- | --- |
| Date | Signature of the Applicant |
|  |  |

**Hereby I declare that I accept the planned internship, declare that the project is in line with the Applicant’s research, and I will supervise the implementation of the project’s results after the internship.**

|  |  |
| --- | --- |
| Date | Signature of the Supervisor(s)\*\* |
|  |  |

\*\*add lines as needed - in one line include the signature of one supervisor

**PART II to be filled in English by the Head of the Committee**

|  |
| --- |
| **A. Checklist**\*\*\* |
| Official letter of support signed by the mentor Copy of the language certificate or a declaration of knowledge of a foreign language signed by Applicant | [YES/NO] [YES/NO]  |

\*\*\*tick the appropriate answer

|  |
| --- |
| **B. Main evaluation criteria** |
| No. | Name, Surname and signature of the Committee member  | Evaluation of points in relation to each criterion |
| A.Description of the planned research activities in hosted institution | B. Rank of the host institution and the mentor | C. Description of the planned scientific results |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| **Average score**  |  |  |  |
| **Total score (sum of the average scores)**  |  |

|  |
| --- |
| **C. Is there a need to evaluate additional criteria?\*\*\*** |
| [YES/NO] If YES fill the Part D  |

\*\*\*tick the appropriate answer

|  |  |  |
| --- | --- | --- |
| **D. Metrics**  | **Applicant 1** | **Applicant n** |
| Total 5-year impact factor of journals in which Applicant published  |  |   |
| H-Index (according to Scopus and Google Scholar) |  |  |
| Total number of citations (without autocitations) based on Scopus and Google Scholar |  |  |
| Point given by the Head of the Committee (max 1 extra point) |  |  |

|  |
| --- |
| **E. Total score**  |
|  |

 On behalf of the Committee

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 Date Legible signature of Head of Committee