



20th FOREIGNERS' FELLOWSHIPS PROGRAMME

CATEGORY A

Application Form for Onassis Research Grants

a) University Professors (all levels): 1) Full Professors, 2) Associate Professors, 3) Assistant Professors and 4) Lecturers. **b)** Post-doctoral Researchers (Ph.D. holders), **c)** Artists-Musicians

Field: **Academic year: October 1, 2014 - September 30, 2015**
Duration of Grant: up to six [6] months

S.M.: **Deadline for submission of candidatures: January 31, 2014**



PERSONAL DATA

01. Family Name (surname):		(as written on your passport)
02. First Name(s):		<i>Please attach a recent photo here</i>
03. Current Academic Position:		
04. University-Faculty-Department / Institution:		
05. Country and place of birth:		
06. Nationality:		
07. Date of birth: ___/___/___	08. Age:	09. Sex (Male/Female):
10. Present citizenship:		11. Passport number:
12. Country of residence:	13. Marital status:	14. No. of children (if any):
15. Office Address:		
16. City:	17. Postal code:	18. Country:
19. Office Telephone (+country & area code):		20. e-mail:
21. Fax number (+country & area code):		Mobile:
22. Home address:		
23. City:	24. Postal Code:	25. Country:
26. Home telephone (+country & area code):		27. e-mail:
28. Please indicate which address should be used for future correspondence:		Home <input type="radio"/> Office <input type="radio"/>

All answers should be written in CLEAR, CAPITAL letters either in Greek, English or French

29. Father's full name:

30. Mother's full name:

31. Spouse's full name:

32. Spouse's current occupation (if applicable):

33. Does he/she intend to accompany you to Greece?

34. Have you ever visited Greece? (Yes/No):

If so, when?

From:

To:

For what purpose?

35. Proposed period of research in Greece: From: To: (max. duration: 6 months)

NOTE: The grant does *NOT* cover the period from July 15 to August 31,201436. Have you applied for an Onassis Foundation Grant before? No Yes If yes, please indicate:

i) how many times you have applied:

ii) the academic year(s):

iii) the category of the fellowship:

37. Ph.D. obtained in: (year)

38. Persons to be notified in case of emergency (list below name, address, phones and relationship):

In Greece:

In your country:

39. Do you carry any Health Insurance?

40. Do you need any help in obtaining visa (if a visa is required)?

41. Please indicate whether you have applied or are planning to apply for a fellowship/grant for the same academic year to any other organization, government or educational Institution in any country. (This information will not prejudice the Foundation's decision on your application).

42. Please make sure that you have included all the documents required.

I hereby certify that all information included in this application form is true and that I will submit to the Foundation all the relevant supporting documents, if required.

DATE: ___/___/___

SIGNATURE OF APPLICANT

CATEGORY A

Application Form

ADDITIONAL REQUIREMENTS

(please check each box after including the corresponding item in your file)

1. A **letter** including all of the following information:
 - The title, purpose and specific object of the research that the grantee intends to conduct in Greece. Additionally, the grantee must mention why it is considered necessary for him/her to carry out research in Greece
 - Specific publishing plan/schedule
 - Specific collaboration with a Professor from a Greek Public University
2. An acceptance letter with which a Full Professor from a Greek Public University agrees to collaborate with the grantee on the specific project
 - Any research in Greece already completed or in which you are currently involved
 - Any previous collaboration with Universities or Institutions in Greece
 - The University or Institution and the Greek colleagues (if any) you intend to collaborate with
 - The proposed period and place(s) of research in Greece. Please indicate whether travel within Greece will be necessary for your research and include a project plan of the trips you intend to make in Greece.
 - Knowledge of Modern or Ancient Greek. Knowledge of the Greek language, whenever not necessary by definition for scholarly purposes, is not a necessary prerequisite. However, elementary knowledge of the Greek language will be taken into consideration.
3. A detailed Curriculum Vitae/List of publications
4. Four recommendation letters from Greece (if possible) and/or abroad
5. All candidates should also include a certificate from their university attesting their exact academic position
6. All candidates should include a photocopy of their Ph.D.

NOTES

1. **DEADLINE:** The application form should be accompanied by ALL supporting documents and should be post-marked no later than **January 31, 2014**
2. The working languages of the Foundation are Greek, English and French. Please note that any document written in any other language should be translated into one of the above languages and **legalised by Public Authority**, otherwise it will not be accepted. Applicants are kindly requested to submit all copies on A4 paper size [297X210mm].
3. The application form should be accompanied by all the documents considered useful for its evaluation (e.g. diplomas, honorary distinctions, articles, audiovisual material, samples of artistic work etc.).
4. Please note that all applicants are allowed to apply for only **one** category of the Programme (A or C).
5. Former fellows can apply again for a grant or scholarship only if five years have elapsed since their previous grant.
6. All applicants are kindly requested to send their applications **directly** to the Foundation and **not** through public or private organizations.
7. The application form should be either sent online or by registered mail to the Foundations offices or handed in to the Foundations Secretariat, at the following address:

ARIONA HELLAS S.A.
Representing the Onassis Foundation in Greece
FOREIGNERS' FELLOWSHIPS PROGRAMME
7, Aeschinou Street
105 58 Athens
GREECE

Please note that application forms sent by fax or e-mail will not be accepted