**MARGARITA SALAS GRANTS FOR THE TRAINING OF YOUNG PHD HOLDERS**

**Form 1: Application**

**Details of the person applying for the grant**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| First surname | Second surname | | Name | | ID |
| **ORCID identifier** | | Telephone | | Email address | |
| University in which you obtained the doctoral degree | | | | | |
| Doctoral programme in which you obtained the doctoral degree (state the area to which the doctoral programme belongs\*) | | | | | |
| If the university in which you obtained the degree was NOT the UPV, select the area to which your activity belongs (the assessment committee may reassign this)  Select an item. | | | | | |
| Date on which the doctoral degree was obtained Click or press here to enter a date. | | | | | |
| As established in the call, state if you have a recognised degree of disability equal to or above 33% | | | | | |
| If any of the following circumstances that allow you to extend the deadline for obtaining the doctoral degree are applicable (see call for details), select it  Birth of a child  Temporary disability or suspension of contract due to pregnancy or during breastfeeding  Temporary disability or another cause for over three consecutive months  Leave of absence for care or due to gender-based or terrorist violence for a period of at least 3 months  Reduction in hours due to legal guardianship or care for a period of at least 3 months  Dependent care for a period of at least 3 months  Recognised degree of disability equal to or above 33%  **Extension that should be applied:**       months | | | | | |
| Have you applied for the same grant in another university? | | | | | |
| **Have you requested any grants from other organisations or institutions for the same purpose and period?**  **If possible, state whether you were successful, specifying the type and amount of grant received.** | | | | | |

\*The area of the UPV doctoral programme can be found at:

<http://www.upv.es/entidades/EDOCTORADO/info/1007774normalc.html>

**Details of the admitting centre**

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| --- |
| Receiving group 1 institution |
| Full name of the lead person from receiving group 1's institution |
| Receiving group 1 |
| Full name of the lead person from receiving group 1 |
| Start and end dates of the study visit requested in centre 1 |

*(Complete if the study visit is going to take place in two centres)*

|  |
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| Receiving group 2 institution |
| Full name of the lead person from receiving group 2's institution |
| Receiving group 2 |
| Full name of the lead person from receiving group 2 |
| Start and end dates of the study visit requested in centre 2 |

     , on             , 2021

The applicant