

Applicant Name: _____

ACCEPTANCE OF APPLICATION BY THE HOST INSTITUTION

I, Dr./Prof. _____, on behalf of the
(name of the Director of the Institute or other Responsible official)

Host Institution _____
(name of the Institution)

Department or equivalent _____
(name of the Department)

declare that I have read the research application submitted on-line to Telethon

by Dr./Prof. _____ Principal Investigator of the project
(name of the Applicant)

titled _____

and that it is complete and correct.

I also declare that the Host Institution will provide the necessary facilities and personnel to carry out the above research project. **If the Applicant is not holder of a permanent position, I am aware that the salary of the Investigator cannot be requested within the Application as part of the Telethon Grant and that it needs to be provided through other means.**

If applicable - I acknowledge that the above-mentioned Investigator also holds a foreign appointment at _____ and I declare that such appointment does not conflict with the time commitment indicated by the Investigator within the Telethon Application for an effective conduct of the proposed research project.

Dr./Prof. _____
(name of the Director of the Institute or other Responsible official)

Position _____

Signature _____

Place and date _____