

Application ECR Publication Fond

1	Applicant	Titel, First name, Surname _____ _____ Qualification phase _____ Department _____ Institute/research group _____ Address _____ _____
1.1	Homepage / CV	URL of your homepage or CV as attachment _____ _____
2	Planned publication	<p>Type of publication:</p> <input type="checkbox"/> Journal article <input type="checkbox"/> Monograph <input type="checkbox"/> Edited volume <input type="checkbox"/> Conference paper <input type="checkbox"/> Others (please explain) _____ _____
		<p>Place of publication: Journal/Publisher/Conference: _____ _____</p>
		<p>(Please, shortly describe the importance and reputation of the journal/publisher/conference)</p>

		<p>Open Access: <input type="checkbox"/> Gold <input type="checkbox"/> Green <input type="checkbox"/> Hybrid <input type="checkbox"/> no open access</p> <p>List of author(s) of the planned publication [Titel First name Surname], [research group], [if not TU Darmstadt: university], [if early career researcher: qualification phase]</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>In case of additional author(s) indicate the role of the applicant: _____</p> <p>_____</p> <p>_____</p>
2.1	Abstract	<p><i>Please insert the title and an abstract of the planned publication</i></p>
2.2	Qualification phase and planned publication	<p>Is the publication related to the doctoral thesis or habilitation?</p> <p><input type="checkbox"/> yes <input type="checkbox"/> no</p> <p><i>If so, please briefly explain the relation.</i></p>



		<p>If related to the doctoral thesis, insert grade of the thesis: _____</p>
3	Funding	<p>For which publication-based service(s) are you applying for funding:</p> <ul style="list-style-type: none"><input type="checkbox"/> Proofreading<input type="checkbox"/> Layout<input type="checkbox"/> Print<input type="checkbox"/> Open Access Costs - <i>Please briefly confirm that no other funds (e.g., third-party project funds, TU Darmstadt Publishing Fund of the ULB) are available for this purpose:</i>

		<input type="checkbox"/> Others (please explain) _____ _____
3.1	Estimated costs	<p>List of services and estimated costs (EUR) per service; please attach supporting documents/offers (please indicate total costs if they exceed the maximum funding amount of EUR 3,000); please list as follows:</p> <p>[Service A]: xxx EUR [Service B]: yyy EUR etc. _____ zzz EUR Total sum: abc EUR</p>