

***Application form for participation in COST  
Intention of participating in the Management Committee***

**1. COST Action**

Number COST Action  
Title COST Action

**2. Details of the research facility**

Name Research Facility-Institute-Department-Faculty  
  
Address  
  
Postal Code  
City

**3.A. Who is to be signed up as the Dutch representative in the Management Committee  
(please include a short CV max.1 page)**

Title  
First name  
Surname  
Position  
Phone  
E-mail  
Early Career Investigator (ECI)\*

Yes      No

**3.B. Details about person nominated as substitute (if any)**

Title  
First name  
Surname  
Position  
Phone  
E-mail  
Early Career Investigator (ECI)\*

Yes      No

\* An Early Career Investigator (ECI) is a researcher with a maximum of 8 years research experience after PhD.

**4. Please give a brief summary (no more than 1 A4 sheet) in English of your intended contribution to this Action. You could describe planned working groups (title of the WG to join) and description of activity to be performed. State what current or planned study you would like to incorporate into this Action and the financial scope of this study.**

**5. The COST form must be signed by the manager of the enterprise or the institution or by the dean of the university faculty)**

Name	
Date	
Signature	

**6. Signature and declaration by the applicant**

- I will notify the CNC on any suspension or ending of my participation to the Action or on any change of my country of affiliation
- I will actively take part in the activities and meetings of the Action
- I will submit any activity report and any other information that may be requested in the context of the Action
- I understand and accept that my participation can be re-evaluated by the CNC

Name	
Date:	
Signature	

*Please send the filled in and **signed** form **by e-mail** to:*

COST National Coordinator (CNC)/ Anna Goedhart

Tel: +31 88 602 5640

E-mail: [cost@rvo.nl](mailto:cost@rvo.nl)