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Application for Travel Expense Allowance

- Only valid for grants as of 01/2024 -

Please complete, sign and return this application together with the attachments in electronic form as an encrypted pdf/zip file and send the password via a different channel (different e-mail/telephone number) to the person responsible at the DFG (Fellowship Office).

DFG reference number:
Cost item no. according to he award letter:
_ast name, first name(s):
The DFG pays travel expense allowances on application in connection with an approved fellowship. For further information and explanations, please refer to the relevant section of the funding guidelines (DFG form 2.00). An overview of the travel expense allowances can be found under: www.dfg.de/fahrtkostenpauschale
1. Travel expense allowances for the fellow
Travel to the host country at the start of the fellowship (fellowship to be taken up outside Germany)
Will you have been living in the host country <u>for more than one month</u> at the time the fellowship starts Yes \square No \square
I hereby apply for a travel expense allowance to travel to the host country (start of fellowship). Actual date of travel to the host country (e.g. date of flight): travel expense allowance is paid out no earlier than with the first fellowship payment.)
Travel expense allowance as support for establishing/intensifying research contacts i Germany
 I hereby apply for a travel expense allowance as support for travel to Germany for the purpose of active involvement in the meeting:
in the conference:
in the specialist colloquium:
in a lecture trip:
Establishment/cultivation of research contacts:
☐ 1st contact trip ☐ 2nd contact trip
Actual date of outward flight/travel to Germany:
Actual date of return flight/travel to host country:
Return travel from the host country at the end of the fellowship (fellowship taken up outside
f the fellow travels back from the host country within one year of the end of the fellowship, a travel expense allowance can be provided for this return journey. I hereby apply for a travel expense allowance based on my actual return journey from the host country (end of fellowship). will be travelling from the host country to: Germany the EU
Actual date of departure from the host country (e.g. date of flight):
This travel expense allowance will be paid out no earlier than with the last fellowship payment, or in connection with the final settlement of your fellowship and only on application).

Deutsche Forschungsgemeinschaft

Kennedyallee 40 \cdot 53175 Bonn \cdot postal address: 53170 Bonn phone: + 49 228 885-1 \cdot fax: + 49 228 885-2777 \cdot postmaster@dfg.de \cdot www.dfg.de



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2. Travel expense allowance for accompanying family members (outward and return travel/host country (fellowship taken up outside Germany))

If your spouse/registered partner and/or your child/children are accompanying you to the host country for at least six months (without a break) and will not have been in the host country for more than one month at the time you start your fellowship, you can apply for a travel expense allowance for your accompanying family members.

My family members will have fellowship. Yes ☐ No ☐	been in the host country <u>for mo</u>	re than one month	when I start my		
	expense allowance (outward joint to the host location outside Ger			table).	
Spouse or registered partner acc. to the German Act on Registered Life Partnerships (LPartG):					
Last name	First name	Accompanying me to the host location outside Germany from: to:			
Actual date of travel to the ho	ost country (e.g. date of flight):				
Child/children (up to age 18)	:				
Last name	First name	Accompanying me to the host location outside Germany from: to:			
Actual date of travel to the host country (e.g. date of flight): In the case of children under two years of age, please submit proof of the costs incurred (invoice + proof of payment) to the					
Fellowship Office.					
the end of the fellowship (fell	ost country canying family members return f owship taken up outside Germa npanying family members for the	ny), it is possible to			
	expense allowance for the actu r in accordance with the Germar			ry for	
My family members will be tr	avelling from the host country ba	ack 🔲 to Germar	y 🗌 the EU		
Actual date of departure from	n the host country (e.g. date of fl	ight):			
have not been reimbursed, paid	vel expenses for myself and my acco or subsidised by a third party. I con ndertake to inform the DFG of any c	firm with my signatu	re that the informatio	on l	
which can be viewed and downl	nes (DFG form 2.00) and the DFG's oaded at www.dfg.de/privacy_policycessed by the DFG because it is requion.	<u>v</u> . Please also forwaı	d this information to	those	
Date:	Signed:				



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