

Innovation in Health

"PhD Transition Fellowship 2022"

PhD Supervisor Confirmation Form

(This form must be submitted together with the application, and must be submitted on time. Late submissions of this form result in the corresponding application being rendered ineligible. Electronic signatures are accepted.)

Name & Contact Details of PhD Supervisor:

Full Name: _____

E-Mail: _____

University/Institute (incl. specific department): _____

In the context of the application by _____ (Full name of PhD/Doctoral student) to the "PhD Transition Fellowship 2022" Program, and in my role as his/her PhD supervisor, I _____ (Full name of PhD supervisor) confirm the following:

1. During his/her PhD studies, the applicant demonstrated an above average level of commitment and dedication to their research as well as acquiring in-depth subject matter expertise in the chosen field throughout his/her studies.
2. The research performed by the applicant as part of his/her doctoral studies is of exceptionally high quality and robustness, and the results lend themselves to commercialisation.
3. I will proactively support and mentor the PhD student whilst he/she explores the commercial potential of the research results.
4. I understand that in the event the student is selected as a winner of the PhD Transition Fellowship 2022, the prize money will be made available to the host institution mentioned above and not the student personally.
5. I will ensure that the host institution administers the grant funding on behalf of the student without charging institutional overheads or other typical/special administrative charges such that the student will be able to use the funds fully and without restriction to explore the commercial potential of their research. This can either be in the form of paying for their salary or for other commercialisation related costs (e.g. patent searches) or a combination of both.
6. No changes, deletions or edits may be made as part of the confirmation.

(place, date)

(signature)

