**Home Supervisor Support Form**

**ERS Long-Term Research Fellowship (LTRF)**

The Home Supervisor Support Form must be completed by the applicant’s current supervisor at the centre where the applicant is currently based. However, it is also possible for the applicant to put forward a past supervisor (e.g. PhD supervisor, etc.) provided that the person can act as a referee and comment on the candidate’s work, in relation to the proposed research project. The information must precisely match the details provided in the online application.

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| Applicant’s name:       |
| Title of applicant’s proposed research project:       |

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| Home supervisor’s name:       |
| Name and country of home institute:       |

Candidates that continue to receive in part or in totality a monthly salary from their home institution during the ERS fellowship must report the figure of the exact monthly NET amount (salary after deductions, such as income taxes and social security, etc.) received in EURO:

|  |  |
| --- | --- |
| [ ]  | No, I confirm that the applicant will not receive any form of income during the period of the ERS Long-Term Research Fellowship. |
| [ ]  | Yes, I confirm that the applicant will receive a monthly income during the period of the ERS Long-Term Research Fellowship of (please specify the NET amount in EURO after tax, social security, etc.):       |
|  | In this case, the candidate will also be requested to upload a salary confirmation letter from the home institution. The letter must be written on the institution’s letterhead and include the institution’s stamp, specifying the exact NET amount the candidate will receive in EURO per month.[ ]  I confirm that the home institution has provided a salary confirmation letter. |

Terms and conditions

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| [ ]  | I confirm that no contractual limitation from the side of the home institution would preclude the candidate to be able to leave the Home Institute for the duration of the ERS LTRF. |
| [ ]  | I confirm that I have read the proposal and support the proposed work. |
| [ ]  | I recommend the candidate and the proposed research project to receive support by the ERS LTRF |
| [ ]  | I understand that the ERS LTRF provides the recipient with a subsistence allowance to cover living costs and travelling expenses to the host institute. Therefore, the candidate and possible ERS fellowship recipient, is not an ERS employee, and that the ERS does not accept liability for the candidate/fellow actions, taxes, health, safety, or research expenditures. |
| [ ]  | I certify that I have carefully read all provisions for the Home Supervisor in the “ERS Long-Term Research Fellowship Application Guidance 2024”. I understand those provisions and I agree to comply with them. |
| [ ]  | I certify that, to the best of my knowledge, these statements are true and complete. I understand that ERS reserves the right to cancel ERS Fellowships that have been awarded on incorrect information provided in the application, including this form. |

Please complete, sign and return this form with the required supporting documentation (if applicable) to the applicant. Candidates are required to submit the Home Supervisor Support Form through the online application plateform.

Date: Click or tap to enter a date.

Home Supervisor Signature: