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|  | EASTERN MEDITERRANEAN UNIVERSITY  RESEARCHER INCENTIVE AWARD APPLICATION FORM |

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| 1. Researchers wishing to benefit from the Researcher Incentive Award support within the scope of the “Eastern Mediterranean University Research Incentive Principles” are expected to fill in this application form completely and submit it with all required appendices to the Dean’s Office in the relevant faculty, or School Directorate. 2. Applicants can apply for the Researcher Incentive Award at the end of April each year for research activities conducted within the previous year. 3. During the candidates’ evaluation for the award, researchers’ work in which Eastern Mediterranean University’s name has been stated as the institutional address is taken into consideration. 4. In order to be eligible to apply for the Researcher Incentive Award, the research incentive score shall be minimum sixty (60) under the condition of providing at least three (3) different types of activities. 5. In addition to this application form, the Activity and Score Table shall be filled in as specified in the Research Incentive Principles and included to the application. |

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| 1. **Applicant’s Information** | | | |
| **Title, Name & Surname** | Please write the title, name and surname of the applicant in this section. | | |
| **Duty** | Please choose duty. | **Personnel No.** | Please, write the personnel no in this section. |
| **Faculty/School** | Choose Faculty/School. | **Department** | Please, write the department’s name in this section. |
| **E-mail** | Please, write the e-mail address in this section. | **Telephone** | Please, write the telephone number in this section. |

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| 1. **Researcher Incentive Application Information** | | | |
| **Year of Application** | Please, write the year of application. | **Academic Incentive Score** | Please, write your academic incentive score within the relevant year. | |

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| 1. **Applicant’s Statement** | | | |
| I hereby declare that the information provided in this application form, documents and supplementary information provided to support the application are true and accurate. | | | |
| **Signature** |  | **Date** | Choose a date |

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| 1. **Unit Researcher Incentive Application and Evaluation Committee’s Approval** | | | | | | | |
| **Committee Note** | Has the applicant obtained scores from at least three (3) different types of activities?  **Yes**   **No** | | | | **Incentive Score Approved by the Committe** | | |
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| **Chair of the Committe** |  | **Signature** |  | **Date** |  | | |

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| 1. **Approval of the Dean/Director** | | | | | |
| **Dean / Director** |  | **Signature** |  | **Date** |  |

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| 1. **Approval of the Research Advisory Board (RAB)** | | | | | |
| **Decision** | ⬜ **Approved**  ⬜  **Not approved** | | |  | |
| **Chair of RAB** | Prof. Dr. Ali Hakan Ulusoy | **Signature** |  | **Date** |  |

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| 1. **Approval of the Vice Rector** | | | | | |
| **Vice Rector** | Title, Name and Surname | **Signature** |  | **Date** |  |