# A1. INFORMATION ABOUT THE FELLOWSHIP HOLDER

* **Name and Surname:**
* Email Address:
* Telephone Number:
* Department:

Academic staff/Student *(delete as applicable)*

# A2. INFORMATION ABOUT THE FELLOWSHIP CO-HOLDER

*\* In case of more co-holders, please copy this section for each of them.*

* Name and Surname:
* Email Address:
* Department:

Academic staff/Student *(delete as applicable)*

# B. PROJECT and RESULTS INFORMATION

* **Project Title:**
* **Research summary and Outcomes:**

SIGNATURE:

DATE:

* Obligatory attachments to this final report are manuscript of the text and confirmation of its handover/acceptance to the review process.