## **Application for SGA project for year 2018**

## Student Grant Agency of the Faculty of Science,

University of South Bohemia	
Name of investigator, year and degree of study (bachelor, master), program, specialisation and the field of study	Signature of investigator, date
Contact e-mail (valid at least till the end of 2018)	Master degree study started in summer term of 2016/2017  (mark only if occured) □
Name and workplace of the project supervisor. Those not employed at the Faculty of Science USB or Academy of Science must provide their CV.	Signature of project supervisor
<b>Department of FS USB</b> , where the project will be solved and where the finances will be deposited	Approval of the head of the department of FS USB, where the project will be solved – name and signature
Project Title	
By signing this form you acknowledge that you have manage the project in accordance with the application detailed financial overview, and will present the result will take place in December of 2018.	on, deliver till Nov 26, 2018 the final report with

Amount requested by the project	