***Annex 7***

**Scientific-Research Grant Call for "*Halyomorpha Halys* Elimination State Programme 2018"**

|  |
| --- |
| **Information about the project** |
| Project title |  |
| Principal investigator (PI)name, surname |  |
| Host institution |  |

**Information about a research advisor**

|  |  |
| --- | --- |
| Research advisor name, surname |  |
| Academic degree |  |
| Position |  |
| Affiliation institute/center, department, unit |  |
| City, country |  |
| Contact information | phone |  | E-mail |  |

**Letter of Commitment**

([[1]](#footnote-1) Please list topics of consultation and briefly describe your experience with this regard. Outline format of proposed consultations – meeting with research team/PI, site visit, online communications, etc.)

[[2]](#footnote-2) Signature of the researcher advisor:

Date:

1. To be completed by a research advisor [↑](#footnote-ref-1)
2. Mandatory [↑](#footnote-ref-2)