## **Application for SGA project for year 2017**

## Student Grant Agency of the Faculty of Science,

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 2017)	Master degree study started in summer term
	of 2015/2016  (mark only if occured) □
Name of the project supervisor (from the Faculty of Science or Academy of Science)	Signature of project supervisor
Name of the head of the department of FS USB (if the supervisor is not form FS USB)	Signature of the head of the department of FS USB (if the supervisor is not form FS USB)
<b>Department</b> which will accept and manage the finances of the project	
Project Title	

detailed financial overview, and will present the results and outcomes of the project at the seminar, which will take place in December of 2017.

Amount requested by the project	