DKMS Stiftung Leben Spenden

John Hansen Research Grant

Application Template

August 2025

**John Hansen Research Grant 2026 - Application Cover Sheet**

|  |
| --- |
| **Title of research project** |
| [TITLE] |
| **Applicant** |
| Last Name: |  | First Name: |  |
| Telephone: |  | Title: | *e.g. MD, PhD* |
| Email: |  |
| Host Institution: |  |
| **Applicants address at host institution** |
| Department/Institute/Clinic: |  |
| Street: |  |
| Post / ZIP code: |  |
| City: |  |
| Country: |  |
| **Main address of host institution** |
| Street: |  |
| Post / ZIP code: |  |
| City: |  |
| Country: |  |
| **Supervisor** |
| Last Name: |  | First Name: |  |
| Telephone: |  | Title: |  |
| Email: |  |

|  |  |  |
| --- | --- | --- |
| **Applicant Signature** |  | **Supervisor Signature** |

**John Hansen Research Grant 2026 - Abstract**

|  |
| --- |
| **Applicant** |
| *First and Last Name* |
| **Title of research project** |
| *Project Title* |
| **Abstract** |
| *Max 700 characters including spaces. Please note, that we need to copy the abstract from the PDF during assessment of your application. Please assure, that the abstract can be copied, i.e. please do not submit this page as an image/scan.* |

**John Hansen Research Grant 2026 - Example Budget Template**

|  |  |  |  |
| --- | --- | --- | --- |
| **Planned Expenses (in EUR or USD)** | *Year 1* | *Year 2* | *Year 3* |
|  |   |   |   |
| Personnel |   |   |   |
| Name, % effort and role |   |   |   |
|   |   |   |   |
| Animal Costs |   |   |   |
|   |   |   |   |
|   |   |   |   |
| Supplies (e.g. antibodies, kits,…) |   |   |   |
|   |   |   |   |
|  |   |   |   |
| Travel (EUR < 2,500 annually) |   |   |   |
| Transportation |   |   |   |
| Lodging |   |   |   |
| Meeting registration fee |   |   |   |
| Small Equipment (EUR < 1,000) |   |   |   |
|   |   |   |   |
|   |   |   |   |
| Facilities User Fees (e.g. microscopy, FACS,..) |   |   |   |
|  |  |  |  |
|  |  |  |  |
| Publication costs |   |   |   |
|   |   |   |   |
| Other direct costs |   |   |   |
|   |   |   |   |
|   |   |   |   |
| **Total EUR** | **-** | **-** | **-** |
| **Number of FTEs** | 0 | 0 | 0 |