Potsdam Graduate School

Please hand in this form, if your workshop participation fee can be covered by your respective institution. The document is to be filled in by your institution and needs to be signed. Your workshop registration is only then binding, when the declaration of cost absorption was handed in at Potsdam Graduate School via email at pogs@uni-potsdam.de.

DECLARATION OF COST ABSORPTION

Institution: _____

Invoice address and contact person:

_____

I, hereby, declare the cost absorption of participation fees by our institution for

participant: _____

at the event titled: _____

on _____ of _____ EUR.

The invoice will be provided by Potsdam Graduate School.

_____ _____

Place, date Signature