

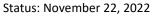




Assessment by a person authorized to supervise a doctorate

The funding program "Future Mobility Grants" of the Innovation Campus "Future Mobility" is a joint initiative of University of Stuttgart and Karlsruhe Institute of Technology (KIT)

Name of Applicant	
Name of Person Authorized to Supervise a Doctorate	
Address of Institute (KIT/ University of Stuttgart)	









1. RATING OF THE APPLICANT

<Summarize briefly the scientific career of the applicant. Consider the following aspects: Commitment, breadth of specialization, scientific performance, future potential. Do you know the applicant personally or are you in contact with a person at the applicant's institute? How do you rate the quality of one or two publications of the applicant? Please consider the following aspects: Originality, innovative capacity, influence on the further development of the discipline, personal contribution of the applicant (multiple authorship).>







2. RATING OF THE RESEARCH PROJECT

For doctoral researchers:

It is an integral constituent of the doctorate.

It extends the subject covered by the doctorate.

Reason:

3. ESTIMATED BENEFIT OF THE STAY ABROAD FOR THE APPLICANT (e.g. including suitability of the host institute chosen)

Germany	INNOVATIONCAMPUS FUTURE MOBILITY	Karlsruhe Institute of Technology
-	ad mainly serve the purposes of ersonal scientific qualification	
corresponds to the activity the app KIT / University of Stuttgart and/o	tuttgart and ICM:" This is the case, wher plicant is required to execute under the e r when the work results of the funded ac ot employed by KIT / University of Stuttga es of KIT / University of Stuttgart.	employment contract with ctivity are needed by KIT /
	: Although KIT / University of Stuttgart m fect of the funded activity that primarily g and further qualification.	
The stay abroad <u>mainly</u> se	erves the purposes of KIT / Univers	sity of Stuttgart.
The stay abroad <u>mainly</u> se (post)doctoral researcher	erves the personal scientific qualif	ication of the

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Place, date

Signature of the person authorized to supervise a doctorate