



International Scientific Cooperation



SLOVAK ACADEMY OF SCIENCES - BULGARIAN ACADEMY OF SCIENCES

## SAS (SLOVAKIA) – BAS (BULGARIA)

Форма <b>B1</b>	Country:	Partner of BAS:
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Reg.№:  (попълва се от БАН-ЦУ)
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### JOINT RESEARCH PROJECT 2015-2017

<b>Title:</b>
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#### Research partners:

<b><u>Institute of BAS:</u></b>  <u>Postal code and address:</u>  <u>Director:</u>	<b><u>Partner institute:</u></b>  <u>Postal code and address:</u>  <u>Director:</u>
<b><u>Project coordinator:</u></b>	<b><u>Project coordinator:</u></b>
Fax:	Fax:
e-mail:	e-mail:

<b>Beginning:</b>	<b>Duration:</b>
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## SUMMARY

**Present state of knowledge in the field, significance and objectives of the joint research:**

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**Keywords (up to 4):**

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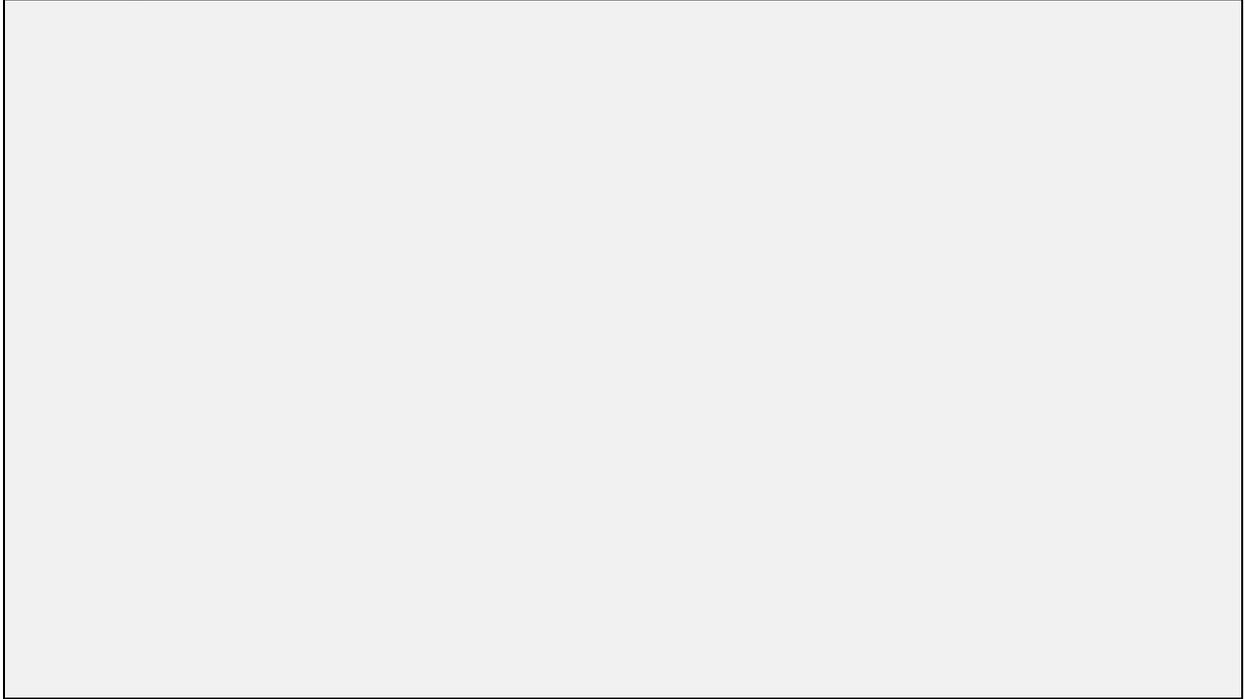
**Background of cooperation and envisaged results and benefit:**

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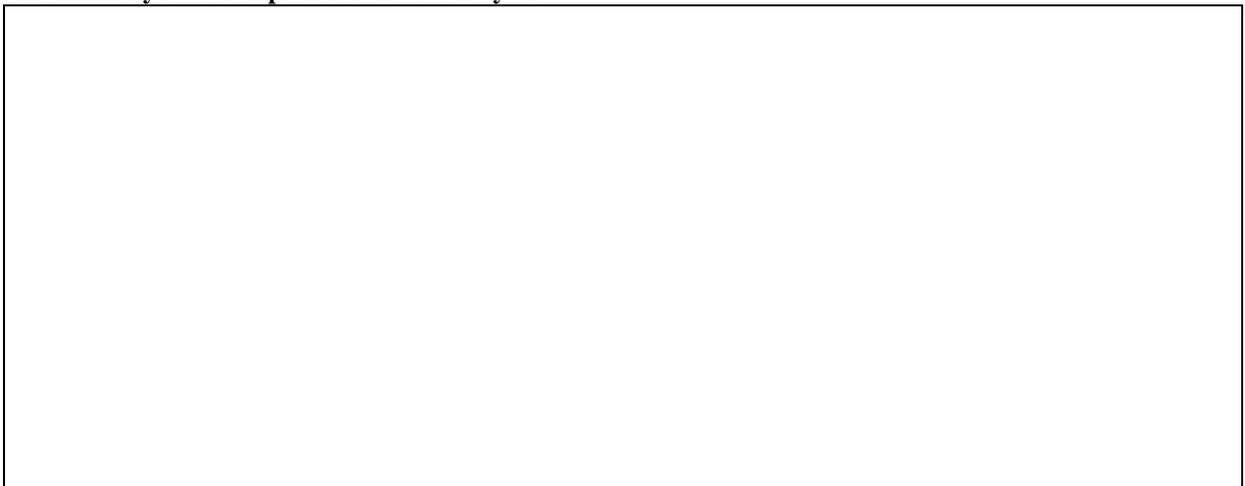
**Relation to other projects (partners, titles, duration, and funding):**

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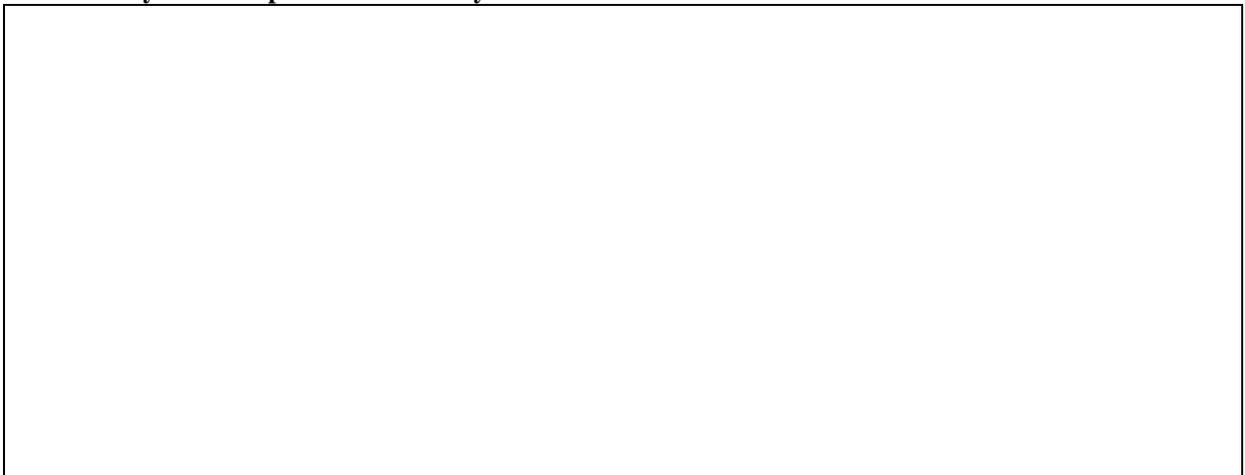
**Research plan for the first year:**

A large, empty rectangular box with a thin black border, intended for writing the research plan for the first year.

**Preliminary research plan for the second year:**

A large, empty rectangular box with a thin black border, intended for writing the preliminary research plan for the second year.

**Preliminary research plan for the third year:**

A large, empty rectangular box with a thin black border, intended for writing the preliminary research plan for the third year.

**Scientific staff involved in the project:**

**From the Bulgarian side:**

**From the partner side:**

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**Funding requested**

**A) Slovak institution (mobility from SAS to BAS)**

Number of planned trips (Total):

Thereof: For the year one: \_\_\_\_\_  
For the year two: \_\_\_\_\_  
For the year three: \_\_\_\_\_

Duration of planned stay (Total):

Thereof: For the year one: \_\_\_\_\_  
For the year two: \_\_\_\_\_  
For the year three: \_\_\_\_\_

**B) Bulgarian institution (mobility from BAS to SAS)**

Number of planned trips (Total):

Thereof: For the year one: \_\_\_\_\_  
For the year two: \_\_\_\_\_  
For the year three: \_\_\_\_\_

Duration of planned stay (Total):

Thereof: For the year one: \_\_\_\_\_  
For the year two: \_\_\_\_\_  
For the year three: \_\_\_\_\_

**Annexes:**

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**SIGNATURES**

<b>On behalf of BAS:</b>	<b>On behalf of SAS</b>
Project coordinator:	Project coordinator:
Director:	Director:
Signed in:	Signed in:
Date:	Date:

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