



## Application for Research Leave

### Research Administration

University of Akureyri  
Research Building  
Borgir v/Norðurslóð  
600 Akureyri  
Telephone: 460-8900  
Fax: 460-8919

***In order for an application to be considered valid, the applicant shall have submitted academic assessment rating reports during the past three years and also a report on previous research leaves.***

Name:

Identification Number:

Professional Title:

Faculty:

Telephone:

Date of Initial Employment at University of Akureyri:

E-Mail Address:

Are You Applying for Research Leave for the First Time?

Yes  No

If no, when and where were you last on research leave?:

### Blocks to be Filled out by Research Administration

Application Number

Have academic assessment rating reports been submitted for the last three years (reference to Article 4)?

A report on research leaves has been submitted ( if applicable) (reference to Article 4).

Has applied for leave and not received it. When?

Period applied for: Autumn 20\_\_\_\_\_ Spring 20\_\_\_\_\_ Autumn 20\_\_\_\_\_

Thereof stay abroad during the period:

Place of stay abroad/in Iceland:

Does applicant plan to finish doctoral studies during the term of leave? Yes ( ) No ( )

If yes, at which University Institute? Please enclose a confirmation of studies with the application, including the name and e-mail address of the tutor:

Research plan (cf. Article 7); here state clear information concerning applicant's plans for use of the leave, e.g. relating to objectives, relation to scientific institutes abroad and domestically, estimated results, publication of conclusions and their promotion. The norm for the length of the report ranges from 500 – 1000 words. Attachments may accompany the application.

Signature:

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Confirmation of Faculty Dean