

London Mathematical Society Emmy Noether Fellowship Application Form

Please refer to the accompanying Guidelines before completing this form. Before submitting your form, please ensure you have completed everything on the checklist at the end. This form and the Guidelines can be downloaded from: <https://www.lms.ac.uk/grants/lms-emmy-noether-fellowships>

This application form should be returned to Women in Mathematics Committee:
womeninmaths@lms.ac.uk

Please include with this application a copy of your Curriculum Vitae and a list of your publications. If your own institution is to host the Fellowship, a Letter of Support, confirming the proposed period of leave or part time working and signed by the relevant Head of Department or Dean as appropriate, should also be part of your application. If an institution other than your own is to be the host, a second Letter of Support, confirming the placement and signed by the Head of the host department or Dean as appropriate, is also required. The letter from the host institution should outline the support available through the university for researchers who are also carers, and describe any support that the department will provide to you in addition to this.

1 Details of applicant

Title

Full
name:

Address:

Tel:

Email:

2 Please describe the area of the mathematical sciences in which you work and what you plan to achieve during the tenure of the fellowship (*maximum two A4 pages*)

3 Please give an itemized and total budget request for the fellowship, indicating how any expenses are additional to those already incurred and will permit additional support for research over that already available.

[Redacted area]

- 4 Please explain how the funding requested will permit you to either re-establish your research after a period of leave or continue your research during a period of care-related part-time working, whichever is appropriate: *(please continue on a separate sheet if necessary)*

[Redacted area]

- 5 Please give the names and contact details of at least two referees (one of them may be in the department where you wish to hold the fellowship)

Referee 1:

Name:
Institution:
Email:
Phone:
Address:

[Redacted area]

Referee 2:

[Redacted area]

- 6 Signature of the applicant:

Date:

[Redacted area]

Please give details of the department where you would like to hold an Emmy Noether Fellowship.

- 7 Host department

Institution:

[Redacted area]

Department:

[Redacted area]



LONDON
MATHEMATICAL
SOCIETY
EST. 1865

Address:

Tel:

Email:

Privacy Statement: Personal data provided on this form will be used by the London Mathematical Society (the major UK learned society for mathematics) to process the payment of this grant under the legal bases "Legitimate Interests" and "Contract". Information will not be shared with third parties, except where it is necessary to process the payment. Data subjects have the right to object to processing of personal data and to access their personal data. Further information about the LMS use of personal data can be found in the LMS Privacy Notice – <https://www.lms.ac.uk/privacy-notice>
