



ACADEMY OF FINLAND

Academy of Finland
Finance Unit
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CERTIFICATION OF WORK ABROAD

Decision No.

Research Council that made decision:

Name of grant recipient:

Site of research abroad:

Working period abroad:

Confirmation by foreign site of research:

Signature

Place/date

Signature by grant recipient

Place/date

To be filled in by the Academy of Finland

Received by the Finance Unit, date



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Name of recipient:

