**Letter of support for a STSM under the COMULIS MultEMPlex COST Innovator Grant (IG17121) Activity**

I, *\_\_\_\_\_\_ (The responsible at HOME institution) \_\_\_\_\_\_\_\_\_\_* from *\_\_\_\_\_\_\_\_ (HOME Institution)* \_\_\_\_\_\_\_\_\_, support the application of *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(applicant’s name)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ proposing to travel to *\_\_\_\_\_\_\_\_\_ (HOST Institution) \_\_\_\_\_\_\_\_\_\_* to realize a STSM for \_\_\_\_ day(s) to carry out the project \_\_\_\_\_\_\_\_\_\_\_\_\_ *(proposal title)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

At \_\_\_(city)\_\_\_\_\_\_\_\_ (country)\_\_\_\_\_, the\_\_(day)\_\_\_ of \_\_(month)\_\_\_\_\_ 20\_

(HOME Institution) Name of responsible, signature and stamp.