

Teaching & Training Unit at the Division of Infectious Diseases and Tropical Medicine

CIH^{LMU} Center for International Health, University Hospital, LMU Munich

Leopoldstrasse 5, 80802 Munich, Germany

Contact details:

Email: ttu@lrz.uni-muenchen.de

www.cih.lmu.de

30 May 2025

Call for Applications: CIH^{LMU} Ethic Fee Scholarship

Background:

Students enrolled in LMU educational programs often require ethical approval for their research involving human subjects. Students are expected to submit their research protocols to ethics committees before proceeding with data collection. At LMU, obtaining ethics approval involves processing fees. To reduce the financial burden and support ethical compliance in global health research, CIHLMU offers this scholarship opportunity to cover the LMU ethics committee fees.

Scholarship Requirements:

Only students currently enrolled in a LMU program are eligible. The scholarship applies exclusively to ethics fees charged by the LMU Ethics Committee. Local or third-party ethics approvals are not covered. Applicants must be the rightful titular of LMU affiliation and must submit documentation proving that the ethical review is part of their qualification work. Only official invoices issued by the LMU Ethics Committee will be accepted. The fees can be paid directly by CIHLMU via bank transfer. Therefore, applicants must ensure that the following billing address is indicated on the invoice:

CIH-LMU Center for International Health

LMU University Hospital Munich

Leopoldstraße 5

80802 Munich, Germany

How to apply?

Please complete the attached application form. The application form should be supported by the following documents:

- Invoice issued by the LMU Ethics Committee
- Proof of enrollment (MSc or PhD) at LMU

This is an ongoing call. Applications can be submitted at any time to the Teaching & Training Unit at ttu@lrz.uni-muenchen.de.

In case of questions, please reach out to the Teaching & Training Unit.

With best regards

A handwritten signature in black ink, appearing to read 'G. Froeschl'.

PD Dr. med. Guenter Froeschl
Division of Infectious Diseases and Tropical Medicine
University Hospital (LMU) Munich

Application Form

Personal information

Last Name and First Name of Applicant:

CIH^{LMU}-owned Study Program:

Study Program Start and current semester:

Current or past LMU supervisors:

Research project title:

Motivation for applying for this scholarship

Please briefly tell us why you are applying for this scholarship, why it should be you receiving the scholarship and how this scholarship will benefit your scientific career.

Date

Signature of Applicant