**Homburger Forschungsförderprogramm der Medizinischen
Fakultät der Universität des Saarlandes**

**Förderperiode 2026**

**HOMFOR-Nachwuchs**

***Important Notes:****Innovative projects from all areas of medicine are eligible for funding, with the goal of enabling early-career researchers to acquire their own third-party funding in the medium term. The funding period is 1 year with a maximum of 12,500 € material costs.*

*Please adhere to the* [*HOMFOR guidelines*](https://www.uni-saarland.de/fileadmin/upload/fakultaet/m/Forschung/HOMFOR-Richtlinien_neu_23.07.2025.pdf) *applicable to this application category when completing the form.
With regard to the length of your application, please refer to the specified maximum character limits for each free-text field.*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant**

|  |  |
| --- | --- |
| **Title:** | Klicken oder tippen Sie hier, um Text einzugeben. |
| **First Name:**   | Klicken oder tippen Sie hier, um Text einzugeben. |
| **Last Name:**  | Klicken oder tippen Sie hier, um Text einzugeben. |
| **Address of Department:**  | Klicken oder tippen Sie hier, um Text einzugeben. |
| **Head of Department:** | Klicken oder tippen Sie hier, um Text einzugeben. |
| **Finanzstelle of Head of Department:**  | Klicken oder tippen Sie hier, um Text einzugeben. |
| **Phone number:**   | Klicken oder tippen Sie hier, um Text einzugeben. |
| **E-Mail:** | Klicken oder tippen Sie hier, um Text einzugeben. |

 |  |

 **Title of application**Klicken oder tippen Sie hier, um Text einzugeben (max. 200 Zeichen).

**Keywords (max. 5)**Klicken oder tippen Sie hier, um Text einzugeben (max. 200 Zeichen).

**Application requirements**

**Title of doctoral degree:**
Klicken oder tippen Sie hier, um Text einzugeben.

**Date of awarding of the doctoral degree:**Klicken oder tippen Sie, um ein Datum einzugeben.

 **Declarations (mandatory)**

[ ]  I certify that I have followed the rules of good scientific practice.

 [Ordnung zur Sicherung guter wissenschaftlicher Praxis an der UdS vom 18.10.2023](https://www.uni-saarland.de/fileadmin/upload/verwaltung/ombudsperson/DB23_58_S.509-522.pdf)
[ ]  I certify that this application has not been submitted elsewhere and exhibits no content overlap
 to other HOMFOR applications from the same department.

[ ]  I certify that I read and confirm the privacy protection declaration of Saarland University.
  [Datenschutzerklärung\_HOMFOR](https://www.uni-saarland.de/fileadmin/upload/fakultaet/m/Forschung/Datenschutzerkl%C3%A4rung_HOMFOR.pdf)

[ ]  I certify that this application was written entirely by myself and that I have not used any AI tools.

[ ]  I agree that my contact data are forwarded to the Department of Research Funding and
 Research Culture of Saarland University who will offer me further funding advice in case my

 application is funded.

**Summary**

Klicken oder tippen Sie hier, um Text einzugeben (max. 2.000 Zeichen).

**Application**

**Scientific background and own preliminary work:**
Klicken oder tippen Sie hier, um Text einzugeben (max. 5.000 Zeichen).

**Work program:**Klicken oder tippen Sie hier, um Text einzugeben (max. 15.000 Zeichen).

**References (max. 30):**
Klicken oder tippen Sie hier, um Text einzugeben (max. 30 Referenzen)

**Figures**:

[ ]  I will submit a maximum of 3 figures including their figure legends compiled in **one** single PDF
 file along with my HOMFOR application via e-mail.

[ ]  I will not submit any figures along with my HOMFOR application via e-mail.

**Requested consumables for 12 months**

|  |  |
| --- | --- |
| **Material** | **Costs in Euro** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

*If the number of rows provided in the table above is insufficient, you are kindly requested to add additional rows as necessary to ensure complete information.*

**Total amount of consumables (max.: 12.500 €)**Klicken oder tippen Sie hier, um Text einzugeben.

**Short CV of applicant in DFG format (mandatory)**

[ ]  I will submit a short CV in DFG format as a PDF file together with my HOMFOR application via
 e-mail.

**Acceptances (if applicable)**

**Approval number for genetic manipulation or examination:**
Klicken oder tippen Sie hier, um Text einzugeben.

**Approval number for experiments on animals:**
Klicken oder tippen Sie hier, um Text einzugeben.

**Approval number for experiments with humans or human samples:**
Klicken oder tippen Sie hier, um Text einzugeben.

**Confirmation of the length of employment (mandatory)**

[ ]  I confirm that I will submit the Confirmation of the length of employment as a PDF file along with
 my HOMFOR application via e-mail.