Template – STSM letter of support from HOME institution

City, Click here to enter a date

I, Full name of the responsible person – head of the lab, e.g. – at HOME institution, from Name of HOME Institution, support the application of Applicant’s full name proposing to travel to Name of HOST Institution to realize a Short Term Scientific Meeting (STSM) within the COST Action Geothermal DHC CA18219 for Number of days days to carry out the project **Title of the proposal**.

Name of the responsible person at HOME institution,

Signature

Responsible person’s title

Name of HOST Institution

Full address

Email address