Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To the Microbiota and Health course organizers,**

I acknowledge that the member in my group \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ will apply for a place in the NDPIA Microbiota and Health coursein Sweden from November 14-18, 2022.

I understand that for all accepted participants, NDPIA/IBA pays the full hotel board of 7753 SEK.

If my group member is accepted to attend but fails to attend the course without notifying the course organizers by October 10th, I will cover the above-mentioned costs in full.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of the supervisor

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name printed E-mail address