



Date: _____

To the NDPIA organizer for the Visualize Your Science course,

I acknowledge that my student/postdoc _____ will register for the course Visualize Your Science.

I understand that NDPIA pays the tuition costs for the course (650 Euros). If my student/postdoc fails to attend the course without notifying the organizer prior to course start, I will cover tuition costs for the course.

Sincerely,

Signature of the supervisor

Name printed