

Wilhelm Busch – Deutsches Museum für
Karikatur und Zeichenkunst
Stichwort: Museums-Fellowship 2026
Georgengarten 1
30167 Hannover

Application for the Museums-Fellowship 2026

1. Personal Data

Surname, first name: _____

Date and place of birth: _____

Private address: _____

Telephone: _____

Email: _____

Nationality: _____

2. University Education

University / City	Period	Field of study / subjects

3. Examinations and Degrees

University	Academic degree	Subject	Date of examination and Grade

4. Professional Record

Period	Institution	Function / Position

5. Research project to be supported

Title: _____

Synopsis: _____

Reasons for applying for the Museums-Fellowship; if possible, specify the collections that are of relevance for your project:

6. Application Documents

- Tabular curriculum vitae yes / no
- Letter of recommendation yes / no
- List of publications yes / no
- Copies of university diplomas yes / no
- Detailed exposition of the research project yes / no

7. Data protection

Data collected for the review of this application may be electronically stored (in accordance with §26 of the German Federal Data Privacy Act)

- I agree that my contact details may be provided potential future fellows to establish an international fellows' network.
- I agree that the museum may publish my name and photos on their media accounts after consulting with me.

City, date

Signature