Attachment No. 4 to the Regulations for awarding financial resources in 2025–2026 for the implementation of visits by visiting professors under the programme "Excellence Initiative International Cooperation – Short-Term Visits"

## **ACCOUNT DETAILS**

## 1. Personal Information

Surname	Name	Gender (	M/F)
Home address			
E-mail address			
Institution or affiliation			
For direct payment, plea	ase fill in all details of your bank accou	nt:	
Name of Account Holde	er		
Address of Account Ho	older		
Name of Bank:			
Address of Bank (brand	ch)		
Bank Account No. – IBA	AN		
Bank Code – BIC or SW	/IFT		
Currency (EUR/USD/PL	N)		