



INTER-COUNTRY TRAVEL GRANT BANK INFORMATION FORM

GRANTEE

Mr./Ms./Dr./Other

Surname

First Name(s)

E-mail

Host Country for
Fulbright Grant

Grant Category

GRANTEE CONTACT INFORMATION IN THE U.S.

Street Address

ZIP and City

Home Institution
and Department

PAYMENT DETAILS

Payment Recipient **exactly
as listed in bank records**

Bank Name

FOR EUROPEAN BANK ACCOUNTS:

IBAN

BIC

FOR U.S. BANK ACCOUNTS:

Account Number

ABA/

BIC

Full Address of Bank

Additional Info

Please double check that you have written all the bank information correctly!

GRANT AMOUNT

Amount in EUR

Additional Info

*Fulbright
Finland
fills out*