

Name of University

Date: _____

Name and title of the associated Professor

Department and address

Tel., Fax:; Email: (of the associated Professor)

Dear colleagues,

As a member of the COST Action CM1407, I would like to recommend the participation of my colleague, (e.g. Ph.D. candidate student), (Laboratory of, Department of, (Name of University) for (duration) STSM (Short Term Scientific Mission) at the (name of HOST institue) institute, in (name of HOST University), (name of HOST Professor). This mission is expected to improve her skills and knowledge in methodology as well as techniques and will strengthen the collaboration of the two research groups by further exploiting any potential intervention as well as elucidating crucial molecular mechanisms

The planned collaboration is within the scope of our COST project.

Please, let me know if you need any further assistance and/or information.

Sincerely yours,

Electronical Signature

Name of the associated Professor