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| --- | --- |
| Secretariat of RC AUTHProposal Submission Office Planning and Research Support Department | Thessaloniki, [Date]Protocol No: ………………….Project No:  |
|  |  |  |
| Telephone: | +302310 …………………. |  |
| Fax: | +302310 853283 |  |
| E-mail: | marketing@rc.auth.gr |  |
|  |  |  |
|  |  |  |

**Letter of Intent of the Host Institution**

We hereby confirm the intention of the Aristotle University of Thessaloniki (AUTH) to host the project with the following details:

* Title: **[Project Title]**
* Acronym: **[Project Acronym]**
* Scientific Responsible: **Dr. [Name], [Position, Department]**
* Resources and Infrastructure used: **[Official Name of the Laboratory/Department],**

which is submitted to theHellenic Foundation for Research & Innovation (HFRI) under the *2nd Call for Research Projects for Postdoctoral Researchers*.

The Legal Representative

Prof. Theodore Laopoulos

Vice Rector for Research and Coordination of AUTH