**Krijn Rietveld Memorial Innovation Award***Leiden University Fund in partnership with Royal DSM***Nomination form**

**Closing date: 5 February 2021**Please submit this form by e-mail together with all supporting documents to [your institute’s Scientific Director](https://www.organisatiegids.universiteitleiden.nl/en/faculties-and-institutes/science/institutes/scientific-directors) with the following subject: Krijn Rietveld Memorial Innovation Award.

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| **Name and contact details of nominee** | |
| Title (Mr./Ms./Mrs.) | Click here to enter text. |
| First name + last name | Click here to enter text. |
| Full postal address (incl. postal code/country) | Click here to enter text. |
| Phone number | Click here to enter text. |
| Email address | Click here to enter text. |

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| **Nominee’s current job/affiliation** | |
| Position | Click here to enter text. |
| Name of employer | Click here to enter text. |
| City + country | Click here to enter text. |

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| **Motivation** |
| Please state why you think the nominee deserves to win the award. The following aspects should be highlighted:   * Quality of the problem definition * Quality of the scientific research * How the research contributes to the United Nations Sustainable Development Goals * Proof-of-concept with the potential to be applied in a commercial product or solution * In the ideal case, a potential partner for commercialization or potential spin-off company has been found(ed) |
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| **Publications and awards (if applicable)** | |
| Please specify and submit in electronic form (e.g. PDF) patents and/or peer-reviewed publications by the nominee. | |
| 1. | Click here to enter text. |
| 2. | Click here to enter text. |
| 3. | Click here to enter text. |
| 4. | Click here to enter text. |
| 5. | Click here to enter text. |

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| **Any other remarks** | |
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| **Nominator** | |
| Please provide your name and contact details. | |
| First name + last name | Click here to enter text. |
| Position | Click here to enter text. |
| Name of employer | Click here to enter text. |
| City + country | Click here to enter text. |
| Phone number | Click here to enter text. |
| Email address | Click here to enter text. |

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| Date of submission | Click here to enter text. |