

# Fulbright Finland

## BANK AND CONTACT INFORMATION

### GRANTEE:

Name:

Street address:

ZIP and city:

E-mail:

Phone:

*Contact information in Finland*

### HOST OF GRANTEE:

Name:

E-mail:

Phone:

*Fill only if applicable*

### ACCOMPANYING SPOUSE

Name:

E-mail:

Phone:

*Fill only if applicable*

## BANK INFORMATION

### FINNISH ACCOUNT

IBAN:

### U.S. ACCOUNT

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

Account number:

BIC / SWIFT

Name of bank:

Send the form to your Program Coordinator by email or by mail to the following address:

Fulbright Finland Foundation  
Hakaniemenranta 6  
00530 HELSINKI  
FINLAND