

Application Form

CRC/TRR 247 Short Term Fellowship

Contact information and fellowship details

| | |
|--|--|
| Family Name / last name | |
| First Name / prename | |
| Gender | |
| Date and Place of Birth | |
| Nationality / Citizenship | |
| Street | |
| Postal ZIP Code and City | |
| State / Country | |
| Phone | |
| E-Mail-Address | |
| Preferred CRC/TRR 247 project | |
| Name of CRC/TRR 247 supervisor | |
| Intended start date and duration of stay | |
| Please write a short project outline and explain the connection to CRC/TRR 247 (max. 1500 characters including space) | |
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Academic Record *Highest academic degree (master, diploma, etc.)*

| | |
|--|--|
| College / University | |
| City | |
| State / Country | |
| Date (attended from – to) | |
| Kind of degree (Bachelor of science, Master of science, Diploma, State Exam, etc.) | |
| Date of Degree (awarded or expected) | |
| Major field(s) of study | |
| Title of thesis | |
| Name and Address of thesis supervisor | |
| Grade Point Average (GPA) / Marks | |

Final Report

I confirm to submit a short report on the results (max. 5 pages) at the end of the fellowship to the mentioned CRC/TRR 247 supervisor and Dr. Franziska Günther (franziska.guenther@uni-due.de).

With submission of my application, I certify that all information contained is accurate and complete.

I am aware that false information will result in exclusion from the admission procedure or – if later detected – from the membership and funding in CRC/TRR 247.

I agree that the provided information will be shared with other persons involved in the application procedure and I agree to the storage of my data for application and admission purposes.

Date _____

Signature Applicant _____

Date _____

Signature Supervisor _____

Please fill in this application form electronically and e-mail it **together with your CV (signed) and degree certificates** as one PDF-file to Dr. Franziska Günther (franziska.guenther@uni-due.de).