



APPLICATION FORM 2018 Winter Research Internship

IDENTITY OF THE RESEARCH INTERN

FAMILY NAME : First name(s) : <i>As it appears on your passport</i>	Sex : <input type="checkbox"/> Male <input type="checkbox"/> Female Country of Citizenship :
E-mail :	Phone (country code + number) :
<u>Exact</u> Starting Date of the Internship : year/month/day	<u>Exact</u> Ending Date of the Internship : year/month/day
University Cycle : <input type="checkbox"/> 1 st cycle (Bachelor) <input type="checkbox"/> 2 nd cycle (Master) <input type="checkbox"/> 3 rd cycle (Ph.D.)	
Number of completed years of study upon application:	Cumulative GPA: _____ out of _____
Projects Selection <i>Insert the project number from the list of research projects or insert the name of the supervisor identified from the Directory of Expertises</i> 1st choice : 2 nd choice :	

HOME INSTITUTION

NAME :	
Address :	
City :	Country :
Postal Code :	State :

CONTACT IN THE HOME INSTITUTION

FAMILY NAME : First name (s) :	
Title :	
E-mail :	Phone (office) :
Address :	
City :	Country :
Postal Code :	State :