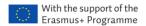




PhD Support Programme "The European Union, Central Asia and the Caucasus in the International System" (EUCACIS)



Country:



- Application Form 2017 -

Dear applicant, please fill in the application form and submit it, together with all required documents, via E-Mail to info@eucacis.eu. Deadline for application is 31. August 2017. 1. Personal details a. Basic personal data First name: Last name: Gender: female male Birthday (YYYY-MM-DD): Country, City of birth: Nationality: b. Permanent address / contact Address: Postal code: City:

Current resident is differ	rent:				
no	yes	s, namely:			
Phone:					
Fax (optional):					
E-Mail:					
Skype (optional):					
c. Language Skills					
Mother tongue(s):					
Your spoken English is:	basic	good	excellent	fluent	
Your written English is:	basic	good	excellent	fluent	
Knowledge of further la	nguages:				
-					
-					
2 Education and acad	lamia haakara				
2. Education and acad		ina			
a. Your <u>highest</u> acade	mic degree				
Duration of studies (MN	//YY – MM/YY):			
Title of the degree in its	original langua	age:			
Translation of title into I	English:				
Academic discipline:					
Name of the university:					
Faculty or department:					
City, country:					
b. Further academic of	degree				
Duration of studies (MM	1/YY – MM/YY):			
Title of the degree in its	original langua	age:			

Translation of title into English:
Academic discipline:
Name of the university:
Faculty or department:
City, country:
c. Further academic degree
Duration of studies (MM/YY – MM/YY):
Title of the degree in its original language:
Translation of title into English:
Academic discipline:
Name of the university:
Faculty or department:
City, country:
3. Professional experience
a. Your actual professional position
Job title:
Name of employer:
Address of employer:
Volume of employment:
Employment since:
b. Past professional position
Job title:
Name of employer:
Address of employer:
Duration (MM/YY – MM/YY):

c. Past professional position	
Job title:	_
Name of employer:	_
Address of employer:	_
	_
Duration (MM/YY – MM/YY):	-
d. Past professional position	
Job title:	_
Name of employer:	
Address of employer:	_
	_
4. Doctoral project Working title of the doctoral project:	
	_
	_
Academic discipline:	
University of enrolment as doctoral student (name, city, country):	
	_
Relevance to one of the programme topics:	
	_
	_

5. Supervisor of the doctoral thesis

Name of the supervisor:	
Academic degrees: _	
University/department: _	
_	
Address: _	
_	
Phone: _	
Fax (optional):	
E-Mail: _	
Skype (optional):	
6. Please name two ref	erees who can estimate your academic and/or professional performance!
a. Referee 1	L
Name: _	
Academic degrees: _	
Institution:	
Position: _	
Address: _	
Phone: _	
Fax (optional):	
E-Mail:	
Skype (optional):	
b. Referee 2	<u> </u>
Name:	
Academic degrees:	
Institution:	
Position:	
Address:	
Phone:	
Fax (optional):	
E-Mail:	,
Skype (optional):	

7. Your motivation: Please state why you want to participate in this programme				
(Character limit: 1000)				
8. Further comments				

(Character limit: 1000)