



Application Form

The DFG Research Training Group 2046 “Parasite Infections: From Experimental Models to Natural Systems” offers 15 cutting edge PhD research projects on

- “One Health“ aspects of Parasite Infections
- Mechanisms of infection and persistence
- Protective and regulatory immune responses
- Impact on wildlife populations

Application Deadline: 31 December, 2014

Please fill out this form by typing your responses and saving as a PDF file. Please print out page 9, sign it and send to us as PDF file along with all your other documents, e.g. application form, mark sheets and certificates, in a single email. Incomplete forms or multiple email applications from a single applicant cannot be accepted.

Please ensure that you send your email-application to us via grk2046@fu-berlin.de by Wednesday, December 31, 2014 the latest. Also, please request your 2 referees to have their completed forms sent to us by email by December 31, as well.

Thank you and Good luck!

1. Personal Data

Last Name

First Name

Middle Name (if any)

Gender

Male

Female

City of Birth

Country of Birth

Nationality

Date of Birth

Marital Status

Children (if any)

Postal Address
(Street, City, Postal Code,
Country)

Phone

Email Address

2. Educational Qualification

2.1 Master's Studies

University

City & Country

Course of Studies

Attended from (MM.YYYY)

to (MM.YYYY)

Degree awarded/expected

Date awarded/expected
(DD.MM.YYYY)

Major Field(s) of Studies

Title of Thesis

Thesis Abstract
(max. 500 characters)

Grade achieved

Highest Grade possible

Honours/Distinction/Prizes
achieved

If degree other than
Master obtained, please
specify

Additional Remarks

2. Educational Qualification

2.2 Bachelor's Studies

University

City & Country

Course of Studies

Attended from (MM.YYYY)

to (MM.YYYY)

Degree awarded/expected

Date awarded/expected
(DD.MM.YYYY)

Major Field(s) of Studies

Title of Thesis

Thesis Abstract
(max. 500 characters)

Grade achieved

Highest Grade possible

Honours/Distinction/Prizes
achieved

If degree other than
Bachelor obtained, please
specify

Additional Remarks

2. Educational Qualification

2.3 Additional Studies (if any)

University/College

City & Country

Course of Studies

Attended from (MM.YYYY)

to (MM.YYYY)

Degree awarded/expected

Date awarded/expected
(DD.MM.YYYY)

Major Field(s) of Studies

Grade achieved

Highest Grade possible

Honours/Distinction/Prizes
achieved

2. Educational Qualification

2.4 High School / Secondary School

School Name

City & Country

Course of Studies

Attended from (MM.YYYY)

to (MM.YYYY)

Degree awarded

Date awarded
(DD.MM.YYYY)

Major Field(s) of Studies

Grade achieved

Highest Grade possible

Honours/Distinction/Prizes
achieved

Additional Remarks

3. Work Experience

Please list only work experiences with a duration of 4 weeks and longer

Name of Company or
Institution (1)

City & Country

Employment from
(MM.YYYY)

to (MM.YYYY)

Position held

Responsibilities /
Job Profile

Name of Company or
Institution (2)

City & Country

Employment from
(MM.YYYY)

to (MM.YYYY)

Position held

Responsibilities /
Job Profile

4. Research Experience

Laboratory Techniques/
Skills

Presentations made/
Posters presented/
Conferences attended

Publications in Peer-
Reviewed Journals

Additional Research
Experience (e.g. teaching,
supervision of junior
students, scientific writing,
collaborations etc.)

5. Languages

Mother Tongue

English

TOEFL taken?	yes	if yes,
	no	TOEFL score

Other proof of proficiency

Additional Languages?

6. Research Interest

First choice - laboratory

Second choice - laboratory

Third choice - laboratory

Why do you want to pursue a PhD in the labs above?

(max. 750 characters)

Why do you want to join the PhD program "Parasite Infections"?

(max. 750 characters)

Why are you the perfect fit for the PhD program "Parasite Infections"?

(max. 500 characters)

What are your future
career plans?
(max. 500 characters)

7. Additional Information

Anything else we should
know?

8. References

Please use the reference forms provided at <http://www.vetmed.fu-berlin.de/einrichtungen/institute/we06/grk2046/index.html> and follow the guidelines for letters of recommendation. Please note that we cannot accept any forms which are not sent to us directly by the referee. Only reference forms and letters of recommendation received directly from an official email address will be considered.

Referee 1

Referee's Name & Title

Email Address

Referee's Contact
Information

Position

Referee 2

Referee's Name & Title

Email Address

Referee's Contact
Information

Position

9. Statement

I hereby declare that all of the information presented in my application is true, complete and accurate to the best of my knowledge, and that the entire application has been completed by myself.

Signature

Date (DD.MM.YYYY)

Place