WORLD FEDERATION OF SCIENTISTS

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APPLICATION FOR A WFS NATIONAL SCHOLARSHIP

(To be completed and remitted to the National Representative)

1. PERSO	NAL DAT	A				
Family name (surname)	:					
Given name (first name)	:					
Date of Birth	:					
Place of Birth (locality/country)	<u>ı</u> :)					
<u>Nationality</u>	:					
Male	Female	Single	Married	Divorced	Widowed	No. of dependant children
Address:						
e-mail addres	<u>s</u> :					
2. EDUCA	ATION (at U	Iniversity level or	equivalent, in	cl. advanced co	ourses)	
Name of Insti	itute <u>L</u>	ocality/ Country	From	To <u>Diploma</u>	as received/scie	ntific discipline

<u>Publications</u>: Please list publications, if any, on a separate sheet .

3. LANGUAGES Mother Tongue:

				
Oth	er Languages	Reading fluent, good, fair	Written fluent, good, fair	Spoken fluent., good, fair
4.]	EMPLOYMENT			
Pres	sent position :			
Inst (incl.	itute : address & e-mail)			
Froi	<u>m-To (dates)</u> :			
		nt, please list on a separate sheet.		
PRE	ESENT NET REMUN	VERATION (after tax)		(per month)
Wha	at financial support w	ould you obtain from source	ces other than the World Fe	ederation of Scientists?
	Institutional (specify	nature and amount)		
	Scholarship (specify	nature and amount)		
	Private funding			
_	TYONG WHATSOCYCI			
5.	INTERESTS			
In w	what type of scientific	/ technological work are ye	ou interested? (List in orde	er of priority)
••••				
••••				

6. With which Instructor and at what Institute do you wish to study?
7. REFERENCES
Please ask two professional referees to write letters of recommendation, in English or French, addressed to Professor A. Zichichi, President of the World Federation of Scientists which are to be sent c/o the National Representative of the WFS Scholarship Programme, and give their names and addresses below:
IMPORTANT: Your application will only be reviewed once all the required documentation has been received in strict conformity with the stipulated details.
I, the undersigned, declare that the information provided above is, to my knowledge, true and complete.
Date: Signature: