

## Application Form

PhD – Medical Neurosciences



MedNeuro

To be submitted to office-medneuro@charite.de

### Part A – Personal Information

#### 1. Person

Ms./Mr.	
First Name	
Last Name	
Date of Birth	
Place of Birth	
Country of Origin/Citizenship	

#### 2. Current Address and Contact

Street	
City/State	
Zip Code	
Country	
E-Mail Address	
Telephone (country-area-num)	

### Part B – Education

#### 1. Second School (*Gymnasium*/High School)

Name of School	
Place/Country of School	
Attended from ... to ...	
Major (if applicable)	
Final Degree and Grade	

#### 2a. University (Highest Degree)

Name of University	
Place/Country of University	
Attended from ... to ...	
Major/Subject Studied	
Final Degree and Grade	
Academic Background	

#### 2b. University

Name of University	
Place/Country of University	
Attended from ... to ...	
Major/Subject Studied	
Final Degree and Grade	

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### Part B – Education (con't)

#### 2c. University

Name of University	
Place/Country of University	
Attended from ... to ...	
Major/Subject Studied	
Final Degree and Grade	

#### 3. Publications (if applicable)

#### 4. International Experience (e.g. Student Exchange/Study Abroad)

#### 5. Academic Honors/Fellowship/Merit

### Part C – Skills

#### 1. Languages

Native Language	
Foreign Language	
Foreign Language	
Foreign Language	

#### 2. Technical Lab Skills (Methods)

#### 3. Other Skills