

Application Form Research Fellowship

I. Personal	
family name:	
first name:	
date of birth (dd.mm.yyyy):	
place of birth:	
civil status:	
current status of education:	
nationality:	
non-Swiss residents, in Switzerland since:	
address of residence:	
phone home:	
e-mail private:	
address of work:	
phone work:	
e-mail work:	
correspondence address:	
correspondence e-mail:	

II. Research Project	
Subject matter	
planned start of the fellowship:	
place of work during project :	

III. Literature List
Please enclose on your application: <ul style="list-style-type: none">➤ list of publications➤ numbers of papers➤ number of first and last author papers

Walter und Gertrud Siegenthaler Stiftung

IV. Other Financial Support	
Please indicate, where else you have applied, received financial contributions (please indicate amount and source of capital)	

V. Reference
Please add two letters of reference. Please also add the confirmation of the hosting scientist.

VI. Research Fellowship requirements
By signing the application form you confirm that you meet the requirements of the research fellowship.

VII. Address of Foundation	
Walter und Gertrud Siegenthaler Stiftung c/o UZH Foundation Moussonstrasse 15 CH - 8044 Zürich	contact: Sabine Harlander e-mail: sabine.harlander@uzh.ch phone: 044 634 48 13

Place:	
Date:	
Signature:	
Documents and Attachments:	<p>Please <u>e-mail</u> the following documents as one PDF document to sabine.harlander@uzh.ch :</p> <ul style="list-style-type: none"> ➤ application form filled in ➤ curriculum vitae (max. 1 page) with 1 photo ➤ list of publications ➤ summary of the research project (max. 1 page) ➤ certificate of exams ➤ 2 letters of reference ➤ letter of confirmation of the hosting scientist <p>The original of this application form (without attachments) needs to be forwarded by <u>mail</u> to:</p> <p>Walter und Gertrud Siegenthaler Stiftung c/o UZH Foundation Moussonstrasse 15 8044 Zürich</p>