

GERSS Call 2020

General Required Information

Full Name

1. General Data

1.1

Current Degree

Age

General Specialty:

Specific Specialty:

Category: [that you wish your application to be evaluated under](#)

Employment Status

Home University ([Working Place](#))

or Institution

Number of Months Required

University (to be filled out by university staff members only)

Faculty

Department

Position

Business Address

Business Phone

Title of the proposal

Institution (to be filled out by research institute staff members only)

Institution

Department

Position

Business Address

Business Phone

1.2

National ID

Passport number

1.3 Which academic referees have submitted a letter of recommendation for this application?

First recommendation letter

Name

University

Department

Mobile

E-mail

Second recommendation letter

Name

University

Department

Mobile

E-mail

بيانات باللغة العربية

الاسم

محل العمل

القسم

الكلية

التخصص العام

التخصص الدقيق

الوظيفة

الدرجة العلمية الحاصل عليها

Is your PhD/Master's thesis
registered?

Thesis registered (if applicable):

Date of registration:

Title of thesis:

Registered at

If you are a PhD candidate, when do
you approximately expect to receive
your PhD title?

2. Previous applications:

Have you applied for one of the following scholarships before (ParOwn/GERSS/GERLS/DAAD)?

If yes, please state the following information:

	Yes
	No

Name of the program:

Host University:

Host Professor:

Call for application / Cycle:

Country:

Duration

Result

Name of the program:

Host University:

Host Professor:

Call for application / Cycle:

Country:

Duration

Result

Name of the program:

Host University:

Host Professor:

Call for application / Cycle:

Country:

Duration

Result

If you have been funded or applied for one of those scholarship programs before, please list here the changes/alterations since your previous application:

3. Additional Information

3.1. Is your wife/husband currently on a GERLS, GERSS or scholarship funded by HHESR? Yes
No

If yes, please state the following information:

Name of Spouse

Name of the Program

Host Professor

Host University

Year of award

3.2. How did you hear about the GERSS program?

3.3. I agree to receive the DAAD newsletter and general information to my e-mail Yes
No