

OLYMPIA MORATA PROGRAMME**APPLICATION FORM**

This application is to be filled out as a PDF form by the applicant. Text fields will be automatically expended if necessary. The completed questionnaire must be attached to the other application documents.

1. APPLICANT**1.1 INFORMATION ON YOUR PERSON**

Surname, Name	
Gender	
Birth date and place	
Address (street, house number, postcode, town)	
Nationality	
Marital status	
Phone number (private)	
Email adress (private)	
Date of birth of the children (if applicable)	
Parental and/or care periods (if applicable)	
Disability/chronic illness (optional)	

1.2 CURRENT EMPLOYMENT

Position (exact name)	
Business Address (street, house number, postcode, town)	
Phone number (business)	

Email adress (business)	
Status and duration of employment (temporary/ permanent since when and until when?)	
Job description (full-time or %part-time)	
Pay level, e.g. TV-L 13	

2. QUALIFICATION PROJECT

Topic and, if applicable, working title of the qualification project	
In which subject do you plan to qualify?	
In which faculty will you qualify (name of the supervisor and, if applicable, name of the mentor)?	
In which institute, department or clinic do you expect to work during the funding period?	
Requested funding period (2 years)	
Have you already applied for funding for your qualification project elsewhere? (Please mark with a cross where applicable?)	☐ No ☐ Yes, where?

3. SCIENTIFIC AND PROFESSIONAL CAREER

3.1 DOCTORATE

Topic of the PhD	
Academic degree (e.g. Dr. med., Dr. rer. nat., Dr. phil., Ph.D.)	
Doctoral subject/field	
Doctoral grade/overall grade of the doctorate	

Date of graduation (Date of the defence, which counts as the date of graduation)	
Date of termination of the procedure (date of fulfilment of the publication obligation)	

3.2 STUDIES

Subject(s)	
Degree(s), final grade(s) and date(s)	
Study location(s) and duration	

3.3 FURTHER QUESTIONS

Scientific activities since graduation	
Activities outside of science (vocational training, professional activity, social commitment, inter-professional qualifications)	
Has your work already been/will your work already be funded by third-party grants (public sector, DFG, foundations, associations and the like)? (Please mark with a cross where applicable)	☐ No ☐ Yes, who funded your work?

Prizes, Awards	
Transfer/translation, significance of the research project for practice (if necessary, describe in more detail in the letter of motivation)	

Information on data protection

Your data will be collected and processed in accordance with the relevant legal data protection regulations. More detailed information on how we process your data and on your rights can be found on the Heidelberg University data protection website (<https://www.uni-heidelberg.de/de/datenschutzerklaerung>). There you will also find the contact details of the data protection officer and his department. By signing this form, you confirm that you have taken note of the information on data protection and consent to the use of your data.

Commitment

I undertake to notify UNIFY - Unit for Family, Diversity & Equality - immediately in writing any change in the information I have provided in this questionnaire.

Place, Date

Signature