



IRTG ,School of Angioscience' Application Form

MD Scholarship

CRC1366 Partner Site: _____

Project Number: _____

PI Name: _____

Planned Fellowship Duration: _____ months

Personal Information

First Name: _____

Last Name: _____

Address: _____

Phone Number: _____

E-Mail Address: _____

Children:
please indicate the number and the year(s) of birth _____

Semester Medical School: _____

Date

Date

Signature Applicant

Signature CRC1366 PI

Please add the following attachments and send everything

To: Uta.Binzen@medma.uni-heidelberg.de

CC: Joerg.Heineke@medma.uni-heidelberg.de, S.Schneider@medma.uni-heidelberg.de

(1) Specific Aims and Summary (max. 0.5 page)

- Review the central questions in the field that will be addressed with the proposed project
- Summarize the goals of the proposed project
- Discuss the expected outcomes and describe the impact of the research in the field

(2) Curriculum vitae

(3) Diplomas (i.e., Abitur, M1 exam)