

## **Application Form**

### *Eurolife Summer School 2019*

*Dublin, Ireland*

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*Biology of Brain Disorders (BBD) 2019: Frontiers in Innovation*

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*Please complete the Application Form and together with the annexed documents, submit the ZIP FILE to the Eurolife General Coordinator (eurolife@med.uni-goettingen.de)*

***PLEASE INDICATE THE NAME OF YOUR UNIVERSITY, YOUR SURNAME AND FIRST NAME IN THE TITLE OF THE ZIP FILE.***

First Name:  
Surname:  
Date of Birth:  
Country:  
Email address:  
Telephone number:  
Address:

Home institution:  
Country:  
Faculty/Department:

Research field and/or title of the project/dissertation:

### ***Annexed Documents:***

**Annex I:** Curriculum vitae

**Annex II:** Motivation letter (200-300 words)

Date & Signature



**Trinity College Dublin**  
The University of Dublin