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| **Application for Scholarship** |
| Salone degli Affreschi - Università degli Studi di Bari Aldo Moro  - Piazza Umberto I - 70121 Bari (Italy)  circsrl13@gmail.com |

Please complete this form then print, sign, scan and send to: circsrl13@gmail.com **along with supporting letter signed by your tutor.**

1. **Personal and Contact Information**

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| Title |  | |
| First name |  | |
| Family name |  | |
| Date Birth dd/mm/yyyy |  | |
| Nationality |  | |
| Passport/IC number |  | |
| Country of Residence |  | |
| Address |  | |
| Street, Number |  | |
| City, State, Postal Code |  | |
| Country |  | |
| Email |  | |
| Phone number |  | |
| Mobile number |  | |
| SCI Membership Number |  | Division of: |

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| 1. **To be eligible for the Scholarship, an applicant:** | |
| - | **must** complete this Scholarship Application Form and return it, as instructed, no later than **15 November 2019** |
| - | **must** have submitted an abstract for flash or oral presentation by **15 November 2019** |
| - | **must** have submitted the tutor supporting letter by **15 November 2019**. |

Signature................................................................................ Date: ……………………………..