Mod. A

AXA Research Fund - POST-DOCTORAL FELLOWSHIPS 2020

*Application Form*

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| --- | --- | --- |
| Last name |   |   |
| First name(s) |   |   |
| Place and date of birth |   |   |
| Citizenship |  |  |
| Address |   |   |
| Phone |   |   |
| E-mail |   |   |
| Name of the Scientific Tutor at L’Aquila University |   |   |
| Department/Laboratory at L’Aquila Univer-sity |   |   |
| PhD achievement date |   |   |
| Current University the candidate is affiliated with (also specify the country) |   |   |
| AXA Call for proposal which the candidate wants to be selectioned:  |
| Information about the strengths of the host Institution (Department/Laboratory) in the chosen research fields (excellence; international experiences and strategy) - 1 page max |  |
| Title of the Project (200 characters max including spaces) |   |   |
| Project’s description (3000 characters including spaces) |  |