Planning & Budgeting Committee | הוועדה לתכנון ולתקצוב

**Outstanding Postdoctoral Fellows in Quantum Science and Technology Scholarship Program**

**2020-2021**

**Candidate Application** – 2020/1

Applicant - please note:

• Please read the bylaws and guidelines carefully.

• Fill out the form accurately and using clear handwriting.

• You must attach all required documents in accordance with the bylaws:

- Resume/CV summary

- Summary description of the doctoral thesis of the candidate and the plan for continued postdoctoral study.

 - Two recommendations: From the doctoral thesis advisor and another staff member who knows/taught the candidate.

 - Details of the rector’s/vice president’s considerations in forwarding candidacy.

• An application that does not meet the conditions for the scholarship or which is deficient will not be considered.

####

1. **Personal Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Last Name** | **First Name** | **I.D. no.** | **Year of Birth** | **Marital Status** | **No. of Children** |
|  |  |  |  | S / M / D |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Last Name** | **First Name** | **Gender** | **Year of Immigration** | **Country of Birth** | **Citizenship** |
|  |  | M/F |  |  |  |

1. **Residential Address:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **City/Town** | **Neighborhood** | **Bldg. No.** | **Street** | **Entry** | **Apartment No.** |
|  |  |  |  |  |  |

1. **Contact Details:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Home Telephone** | **Mobile Telephone** | **Work Telephone** | **Additional Telephone** | **Email Address:** |
|  |  |  |  |  |

**4. Academic Studies**

|  |  |  |
| --- | --- | --- |
| Years  | Institution | Degree |
|  |  |  |

* **Specify which foreign institution accepted the candidate for postdoctoral studies.**

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**5. Awards, Citations, Etc.**

|  |  |
| --- | --- |
| Year | Award for Excellence |
|  |  |

**6.** **Details Regarding Doctorate**

|  |  |
| --- | --- |
| **Subject of Doctoral Work** |  |
| **Institution Awarding Doctoral Degree** |  |
| **School/Field** |  |

**7. Names of Advisors and References** (you must attach letters of recommendation)

|  |  |  |
| --- | --- | --- |
| Name | Position | Course(s) Taught by the Candidate |
|  |  |  |

**8. University’s Considerations in Submitting the Candidate (to be completed by the president or vice president for academic affairs of the institute; may be attached in a separate letter)**

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**9. Candidate’s and University’s Commitment to the Required Terms in the Bylaws.**

We the undersigned undertake to fulfil all of the terms of the scholarship which appear in the bylaws and guidelines.

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Candidate’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rector’s/Vice President’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_