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**APPLICATION FORM**

### Euro league for Life Sciences

### Summer School 2020

**" Mediterranean Diet – from Genes to Health "**

**Robert H. Smith Faculty of Agriculture Food and Environment,**

**The Hebrew University of Jerusalem, Rehovot, Israel**

**21 June – 02 July 2020**

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| Please complete in BLOCK LETTERS and send this form to: Ms Noa Schwarzwald, noapl@savion.huji.ac.il **International School for Agricultural Sciences**  **Robert H. Smith Faculty of Agriculture Food and Environment, Rehovot 76100, Israel.**  **Application deadline: 30 April 2020 or until places are filled** |
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| Personal data | | | | | |
| Family name: | | | | | |
| First name(s): | | Male: |  | Female: |  |
| Date of birth:  (date/month/year) | | Nationality: | | | |
| Current address | | | | | |
| Street and No.: | | | | | |
| Telephone No.: | E-mail: | | | | |
| Postal code and city: | Country: | | | | |
| Academic profile | | | | | |
| Degree presently pursued / Major field(s) of study: | University | | | | |
| Month and year of enrolment: | | | | | |
| Language proficiency in English:  Indicate level: Poor Moderate Good /Excellent | | | | | |

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| **Motivation for participation in the intensive summer university. Relevant prior studies/ academic background:** | |
| **Signature of applicant**  I wish to apply for the ELLS Summer School **”Mediterranean Diet – from Genes to Health - 2020”** at the Faculty of Agriculture, Rehovot.  I hereby confirm that the above information is correct. | |
| Date: | Signature: |

**For students from abroad**

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| Alternative/Parents address (July 2020) | | |
| Street and No.: | | |
| Postal code and city: | Country: Germany | |
| Telephone No.: | Fax No.: | E-mail: |
| Contact person in case of emergency | | |
| Name: | Relationship: Mother | |
| Street and No.: | | |
| Postal code and city: | Country: | |
| Telephone No. (Private/ Work): | Fax No.: | E-mail: |