# Application to Forskaraspiranterna

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| Surname Given name | | |
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| Education program incl. current semester | Email | |
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| **Does the project need additional ethical approvals**  Yes  No  **Has the project been approved by an Ethical Board?**  Yes  No  **If Yes, add Dnr:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| **The applicant has previously held intermittent employment with hourly wages**  Yes  No | | |
| **Applicant signature \*** | | **Date Name** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Supervisor signature\*** | | **Date Name** |
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| \*I hereby confirm that I have read FS 1.3.2-1815-24 and fully comply with the stated requirements. | | |