# Application to Forskaraspiranterna

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| Surname Given name |
|       |       |
| Education program incl. current semester | Email |
|       |       |
| **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. |