

APPLICATION FORM FOR PROGRAM START IN OCTOBER 2024

PLEASE FILL THIS FORM, SAVE IT AND UPLOAD IT AS AN ATTACHMENT TO YOUR ONLINE APPLICATION.

PERSONAL DETAILS		
Name		
First Name(s)		
Gender	male	female
Nationalities		
Date of birth (dd/mm/yy)		
Country of Birth		
CONTACT DETAILS		
Address		
Valid until		

Phone

Email

HIGHER EDUCATION/ ACADEMIC BACKGROUND (CHRONOLOGICALLY)

List of colleges/ universities and obtained degrees

Name and location of college/university

Name/ location	Country	Subject	Duration	Degree	Grade	Transcript
of college/			(from /	achieved		of records
university			till)			attached?

Please upload all available copies of your degree certificates and the transcripts of record with your application.

What were your main fields of interest during your studies? List the three major ones!

DIPLOMA OR MASTER'S THESIS:

Subject

Advisor

Completed (from/till)

Grade

Name of university

Short summary of thesis:

Academic publications (if applicable)				
Did you receive any pri	zes, awards, grants or t	the like?		
RELEVANT WORKING	S EXPERIENCE (CHR	ONOLOGICALLY)		
Please list relevant wor	king experience:			
Kind of work/ job title	Duration (from/ till)	Name & address of employer	Certificates attached?	
Stays of more than three				
RESEARCH INTERES	TS			
What are your main fiel	ld(s) of interest you wis	h to work in as a doctoral studen	t?	
What are your DIW dep	partments of interest (op	otional)?		
LANGUAGE SKILLS				
Describe your English I	anguage skills			

Describe your German language	skills
Date and Score of TOEFL-Test (if	applicable). Please also attach copies of test certificates
Please indicate any other activitie	s, interests or hobbies
RECOMMENDATION LETTERS	
Please give the names and affiliar recommendation.	ions of two professors who will submit letters of
Name	
Affiliation	
Address	
Telephone	
Email	
MISCELLANEOUS	
Have you previously applied to th	e DIW Graduate Center?
Yes	No
If yes, please specify year and ou	tcome
Have you ever been enrolled in a	PhD program?
Yes	No
If yes, please specify time, duration	on and name of the program
Please also use the statement of wish to pursue another PhD.	objectives to explain why you wish to change programs or

Did you or do you plan to apply to PhD programs other than the DIW GC? Please specify:
How did you learn about the DIW Graduate Center?
Anything else you would like us to know concerning your application?
DECLARATION:
By submitting this document I declare that all information given is complete and accurate. All documents required are enclosed. I am aware that providing false or incomplete information intentionally may lead to rejection of my application or, if discovered after admission, to the revocation of my admission and the loss of my scholarship.
This form must be submitted electronically. It is valid without signature.
Place, Date.