

Visiting Associates

APPLICATION FORM

1. Basic information

1.1 Name
First Name: Family Name:..... Title

1.2 Age Date of birth M.../ F...
Nationality Nationality at birth (if different)

1.3 Address Permanent address if different

Telephone: daytime evening

Fax E-mail

1.4 Present occupation / position

1.5 Give a brief description of any project which a period of work or study at the University of Oxford in the field of ageing would enable you to undertake

1.6 Give the names, positions held and addresses, **e-mail** (if any) and telephone numbers of TWO referees
(a) (b)

1.7 How did you hear of the Fellowship?

2. Education, qualifications, publications, awards and career

2.1 Universities, colleges etc attended

(1) past	Degrees or diplomas awarded, with grades	Dates
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(2) present (if applicable)	Degree etc expected, with subject	Date
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2.2 Languages : degree of proficiency in languages relevant to your research

2.3 Publications, exhibitions, prizes, awards or fellowships

2.4 Career to date, work or other relevant experience

3. Availability:

I prefer to take up the Fellowship in:

Hilary Term:	January to March	<input type="checkbox"/>
Trinity Term	April to June	<input type="checkbox"/>
Michaelmas Term	October to December	<input type="checkbox"/>
No preference		<input type="checkbox"/>

4. Why you wish to study or work in an age related area at the University of Oxford

Give a clear account for the benefit of the Fellowship Committee of the work you hope to carry out with the help of a Fellowship Award.

5. Declaration

I hereby declare that all statements made on this application form are to the best of my knowledge true.

Date

Signature
