

Dianalund Summer School on EEG and Epilepsy

15th – 21st July 2018

APPLICATION FORM

First name:		Last (Family) name:	
Nationality:		Year of birth:	Gender: F M
Current position /affiliation:			
Address			
E-mail		Telephone:	
Specialty/degree:		Obtained in year:	
Training in EEG:	Institute / Department:	Number of years:	

Do you wish to apply for bursary (please check)?

Yes No

Will you be able to attend the course only if you receive bursary?

Yes No

If you apply for bursary, please justify your request in the box below:

Please describe shortly why you would like to participate in this EEG course:

Please send the application form, a short CV (max. 2 pages + publication list)
and a recommendation letter to:

sbz@filadelfia.dk

Deadline for application: March 31, 2018