

European Society for Paediatric Endocrinology
APPLICATION FORM for ESPE Sabbatical Leave Programme
Sponsored by E. Lilly Company

Applicant's Name and first Name:.....

Title and Function:.....

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Date of birth:.....

Date of ESPE membership:.....

Date of application:.....

Professional address:

Division:.....

Institution:.....

Street and Nr:.....

City:.....

Zip Code:.....

Country:.....

Tel.:.....

Fax:.....

E-mail:.....

Host Institution:

Name and first name of the host person:.....

Division:.....

Institution:.....

Street and Nr:.....

City:.....

Zip Code:.....

Country:.....

Tel.:.....

Fax:.....

E-mail:.....

Title of the Research project:

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Period when sabbatical leave will take place:

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Documents to include (4 copies of each):

1. Applicant's cover letter
2. application form
3. short C.V. with most relevant publications
4. Host Institution statement

Date of signature:

Signature of the applicant:

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