



Application Form ENS Fellowship 2011

Applicant's name _____

Applicant's address _____

Email address _____

Date of birth _____

Address of actual
working institution _____

Project description to be enclosed and formatted as follows: title, background, aim, methods, results to be expected, importance of project, timetable, references (maximal length 5-6 pages)

Address of host institution
and responsible host _____

Desired duration
of the fellowship
(max. 6 months) _____

Anticipated date of
beginning/end of fellowship _____

To be enclosed:

1. C.V.
2. Project description according to requested format (see above)
3. Letter of acceptance of host institution
4. List of scientific papers presented at ENS Meetings (applicant, host or originating institution)
5. Copy of attendance certificate of at least one ENS Meeting
6. Copy of identity card

Please send the original and 5 copies to the following address:

Prof. Dr. Heinz Reichmann
European Neurological Society
Association House
Freie Strasse 90, P.O Box
4002 Basel / Switzerland

Deadline for submission: 14 October 2010 (date of receipt)