



Health Data Sciences PhD Program Application Form

Part A – Personal Information

Title, first and last name:

Address:

Phone:

E-Mail:

Date of Birth:

Nationality:

Gender: Female Male

Part B – Education

Highest level of completed university studies:

Master Promotion/PhD Medical degree
German Diploma Magister Other:

University (Highest Degree)

Name of School:

Place/Country of School:

Major/Subject Studied:

Graduation Date:

Final Degree:

Previous relevant coursework (check all that apply and attach transcripts as proof):

Epidemiology Biostatistics Meta-research
Population Health Sciences Public Health Other:

Part C – Misc.

Potential Mentor(s): 1.
2.
3.

Research Topic Ideas: 1.
2.
3.

Describe how you will support yourself financially during the 3-year full-time program (eg. Mentor’s Grant, external scholarship, etc.):

How did you hear about our program?

Documents to include with application form:

(Refer to Application Check-List for detailed information)

Curriculum Vitae (CV in EN)
Letter of motivation (English)
Proof of proficiency in English

Degree certificates/Diploma
Letter of reference (English or DE)
Proof of relevant coursework (See Part B)

Date: _____ **Signature:** _____

Your information is subject to data protection. It will be treated confidentially and will not be made accessible to third parties.

Please send your complete application preferably as a single PDF attachment (File name: Last Name_HDS Application) by e-mail to HDS-PHD@charite.de before April 30, 2020 11:59 pm CET (GMT +1).

Please send your transcripts along with the application in the same PDF file.

If you have any questions, please email: HDS-PHD@charite.de