**2024-2025 Application Form for a Research Scholarship**

1. **Personal Information**

Title (Mr./Miss/Ms./Mrs.):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sex**: **M** / **F**

Place of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I.D./Passport Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

International Bank Account Number (IBAN): \_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Previous Educational Experience**

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| --- | --- | --- | --- | --- | --- |
| **Name of institution** | **Faculty** | **Department** | **Years** | **Name of qualification/degree** | **Date completed/expected to be completed** |
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| **Research topic (for Ph.D. candidates)** | | | | | |
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| **Name of supervisor (for Ph.D. candidates)** | | | | | |
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| **Awards and grants** | | | | | |
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| **Publications** | | | | | |
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| **Lectures and conference presentations** | | | | | |
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1. **Application for Graduate/Postgraduate studies**

* Please list the scholarship you are applying for, indicating whether the scholarship is for Graduate (Research LL.M.), Ph.D. (regular track), or direct Ph.D. track.

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* Please specify your research interests and thesis/dissertation topic.

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* Please state the names and emails of three persons who can supplement the required Letter of Recommendation:

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. **Application for employment by the Buchmann Faculty of Law**

Please specify any research positions you plan to obtain within the Buchmann Faculty of Law:

[ ] I do not intend to hold any research or fellowship positions.

[ ] I intend to hold research or fellowship positions outside of the Buchmann Faculty of Law/Tel Aviv University.

I wish to forego approval for the following activities:

**First Semester**

|  |  |
| --- | --- |
| Place of employment | Buchmann Faculty of Law/Tel Aviv University |
| Course title and lecturer |  |
| Scope of job (%) |  |
| Number of working hours per week |  |
| Number of working days per week |  |
| Remarks |  |

**Second Semester**

|  |  |
| --- | --- |
| Place of employment | Buchmann Faculty of Law/Tel Aviv University |
| Course title and lecturer |  |
| Scope of job (%) |  |
| Number of working hours per week |  |
| Number of working days per week |  |
| Remarks |  |

1. **Information regarding scholarships**

If relevant, please specify any scholarships you have previously applied for from the Zvi Meitar Center for Advanced Legal Studies:

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If relevant, please specify any scholarships the Zvi Meitar Center has awarded you for Advanced Legal Studies:

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If relevant, please specify any additional scholarships you have been awarded outside of the Zvi Meitar Center for Advanced Legal Studies:

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