Application Form

Family name:						
Given name(s):	Male O Fem	nale O other O				
Email:						
Nationality:						
Current postal address:						
Handicapped (optional))					
Education						
High school	Town/Country	Time j	period	Grade		
College/University	Time period	Field / Major	Degree	Grade*		
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*Please describe shortly the link to a website with a suita	grading system used able explanation). If p	by your university ossible, indicate y	y (if available, pour rank relativ	olease provide a ve to your cohort.		
Work experience						
Position	Time pe	Time period Na		ame of employer		

Diploma / Master thesis

Title:							
Subject:		Advisor:					
Date of completion:		Grade:					
Summary:							
Publications							
Language skills							
	Read	ing/Writing	D:-	Madhan	Speakin		D!-
Language	tongue	ent Average	Basic	Mother tongue	Fiuent F	werage	Basic
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Stays abroad							

Prizes/Awards/Fellowships	
References	
We are asking for one letter of	recommendation from an experienced scientist. She/he should
	(irtg@math.uni-bielefeld.de) February 28, 2023. Please
provide her/his name and affiliat	
Name:	Email:
Affiliation:	
In addition, please provide nam	ne and address of two scientists who would be willing to writ
	ation to support your application. At least, one of them should hav
a research record in one of the fie	elds of the IRTG.
N.T.	г п
Name:	Email:
Affiliation:	
Homepage:	
Name:	Email:
Affiliation:	
Homepage:	
Homepage.	
Interviews	
<u> </u>	cheduled in March 2023. Please let us know
any possible constraints of yours	with regard to this period.
Additional information	
Any information about yourself t	that you want to let us know.