# **Contact details**

|  |  |
| --- | --- |
| **Name in Full:**(Please underline surname) |  |
| **Work address** |  |
| **Present:**(in case of clinical rotation) |  |
| **Permanent:** |  |
| **Fax:**  |  |
| **E-Mail:** |  |
| **Telephone:** |  |

# **General Information**

* 1. Children:

[ ]  I don't have children.

[ ]  I have …………. (number) child/children.

* 1. Have you previously taken parental leave or carer's leave?

[ ]  yes 🡪 period: ……………………………………………………………………………

[ ]  no

* 1. Do you currently work full-time or part-time?

[ ]  full-time

[ ]  part-time:…………….%

* 1. If you successfully participate in the program and are selected for funding, would you like to work full-time or part-time?

[ ]  full-time

[ ]  part-time:…………….%

*[Format:* *Font: 11 point Arial; Line spacing: 1.2]*

# **Academic education**

|  |  |  |
| --- | --- | --- |
| **from – to** | **Discipline (Degree)/** **scientific/ clinical work** | **University/Department/ Division, City** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Please indicate the time periods relevant for your desired clinical specialization or sub-specialization.**

Have you worked abroad in your previous career? If yes, please state the period and institution/clinic.

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

# **Publications**

Original manuscripts in peer-reviewed scientific journals

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Journal, including Digital Object Identifier** | **Year** | **Authorial role** | **IF** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **…** |  |  |  |  |
| **…** |  |  |  |  |

**Please indicate the most significant publications and attach them as a PDF file in the appendix.**

**Authorial role:** F = First author, L = Last author, C = Coauthor; **IF:** Impact factor at publication date

# Research grants, stipends, awards

**Research grants**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Funding agency, project number** | **Authorial role** | **Project title** | **Funding from – to (years)** | **Sum****(€)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Authorial role:** M = Main applicant, C = Co-applicant

**Stipends and awards**

|  |  |  |
| --- | --- | --- |
| **Year** | **Name (of the stipend / award), Funding agency** | **Sum (€) / Funding** |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| City, Date |  | Signature |

*[Format:* *Font: 11 point Arial; Line spacing: 1.2]*

# Study proposal

### Title of the project

### Aims of the project

*Max. 1000 characters including spaces.*

### Description of the project

*Describe the project, methods, as well as the analytical approach. State, which methods are already, established. Describe the cohorts and ethical approval number if necessary.*

*Max. 4 pages.*

### Milestones

*Present work program and milestone in table, for instance:*

**Work program**

|  |  |  |  |
| --- | --- | --- | --- |
| **Subproject(s)** | **2024** | **2025** | **2026** |
|  |   |   |   |
|  |   |   |   |
|  |   |   |   |
|  |   |   |   |

### References

### Required qualification elements for the study proposal

*Indicate which courses are necessary for performing the proposed project, e.g. courses for working with laboratory animals equivalent to a FELASA, …*

# Suggested mentor

Preferred mentor:

*Mentor must not be a direct supervisor in the Hospital Department/Division/Institute of the applicant.*

# Career Management

*Briefly mention future career steps during and after participation in* ***MD-LEICS****, including:*

*Proposed completion of residency („Facharzt-Ausbildung“):*

*Proposed research stays abroad:*

*Proposed grant applications:*

*Proposed submission of Habilitation thesis:*

# Motivation letter

*(max. 2 pages)*

*[Format:* *Font: 11 point Arial; Line spacing: 1.2]*

# Curriculum vitae

*(max. 2 pages)*

*[Format:* *Font: 11 point Arial; Line spacing: 1.2]*