## **WWSC Academy APPLICATION**

The application is sent to <a href="mailto:education@treesearch.se">education@treesearch.se</a>. Attach a scanned file with signatures as well as the filled in pdf form in the mail.

PERSONAL INFORMATION				
FULL NAME:	First	Middle	Last	
E-MAIL:		PHONE:		
PERSONAL II	DENTIFICATION NUM	MBER:		
AFFILIATION:	University		City	
	Offiversity		Only	
	Department		Division	
NAME OF PR	OJECT:			
NAME OF SU	PERVISOR:			
	APP	LICANT COMMITM	IENTS	
			e student will attend all WWSC applicants PhD study period.	
Academy (2 co		wo WWSC workshops	ow the courses offered by WWSC dyear. The enrollment is for the	
DATE:	SIGNATU	RE APPLICANT:		
DATE:	SIGNATURI	E SUPERVISOR:		

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## Letter of motivation

Describe how the WWSC Academy courses will

- contribute to development within your doctoral studies.
- how the network within the WWSC-Academy will gain your doctoral studies

Describe, briefly, the challenges and research questions of your doctoral studies.