|  |  |  |
| --- | --- | --- |
| **Personal information** | | |
| **Name:** | *Surname* | *First name* |
| **Email:** | *Email* | |
| **Skype/LinkedIn/Facebook/Twitter IDs:\*** |  | |
| **Phone number:** |  | |
| **Address**: |  | |
| **Citizenship and place of residence** | 1. Citizenship 2. Place of residence | |
| ***\*Providing Skype account is mandatory while noting at least one of other social media accounts is preferred*** | | |

**Logo, company name

Description automatically generated Scholarship Form**

**Please, complete this form and attach it in the required part of the application form by 4 August 23:59 CET.**

|  |
| --- |
| 1. **Please describe first non-academic and then, academic factors, reasons, and/or events that shaped your career choices and pushed you to continue in the area you have chosen to study. (200 words max.)** |
|  |

|  |
| --- |
| 1. **Please outline your academic background and social experiences which you consider are qualified considering scholarship requirements and for the field you aim to study. (300 words max.)** |
|  |

|  |
| --- |
| 1. **Please briefly elaborate on what you plan to do after you complete your MA studies in terms of career directions. In addition, state what issues you think can be improved in your community and link those issues with your study and specialization by judging in which regard you can contribute to the resolution of them in future. (300 words max.)** |
|  |

|  |
| --- |
| **Important Information and Declarations:**  **Please read the following statements carefully and consent that you understand conditions below:** |
| **To be considered, applicants must send a completed scholarship form alongside documents specified at the scholarship website.**  **If selected, you consent the publication of your name and commit to write a letter of gratitude to the family of Mahammadali Ibrahimli as soon as you complete your studies.**   * **I consent to my application and the details within it being shared with Scholarship Committee staff and the donors of this scholarship.** * **I give permission to the Scholarship Committee to obtain copies of my documents required for the evaluation.** * **By submitting this form, you agree that Scholarship Committee can process your information and keep a copy of your form to collect statistics and detect and prevent fraud.** * **I reiterate that all the information provided in the form and in other required documents are correct given the right of Scholarship Committee to cancel your selection and awardee status in case of detecting dishonesty.** |
| **Your Name:** |
| **Your Signature:** |
| **Date:** |