**PRESS FELLOWSHIP PROGRAMME**



**APPLICATION FORM**

For office use only: WCID Status

Please save this document as ‘last name-first name’ as a Word document or pdf and email it   
as an attachment to [pressfellowship@wolfson.cam.ac.uk](mailto:pressfellowship@wolfson.cam.ac.uk) (Note: boxes will expand as you type).

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PERSONAL INFORMATION** | | | | | | | | |
| Title | First Name | | | | | Other Names (in full) | Surname / Family Name (BLOCK CAPITALS) | |
|  |  | | | | |  |  | |
| Gender | Date of Birth (dd/mm/yy) | | | | | Nationality | Email Address | |
|  |  | | | | |  |  | |
| Married/Partner/Single | | | Accompanying | (if accompanying) Title & name of Spouse/Partner | | | | (if accompanying) Children DoB |
|  | | | Y/N |  | | | |  |
| Address for correspondence including postcode | | | | | | | | |
|  | | | | | | | | |
| **EDUCATION/ACADEMIC DETAILS** (University record) | | | | | | | | |
| Dates | | Institution and Degree(s) awarded | | | | | | |
|  | |  | | | | | | |
| **EMPLOYMENT DETAILS** (Present employer) | | | | | | | | |
| Date from - | | Position held and Employer’s name and contact details | | | | | | |
|  | |  | | | | | | |
| **PREVIOUS EMPLOYMENT** (List most recent first) | | | | | | | | |
| Dates | | Position details and Employer’s name | | | | | | |
|  | |  | | | | | | |
| **DETAILS of countries visited in connection with your work** (Dates and details of Assignment/Scholarships etc). | | | | | | | | |
| Dates | | Country | | | Details | | | |
|  | |  | | |  | | | |

*Please continue on page 2*

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| --- | --- | --- | --- |
| **PROPOSAL** | | | |
| Subject area/Title: |  | | |
| Research proposal (Approx 1000 words)  (Web addresses for articles or attachments can be included) | | | |
|  | | | |
| **REFEREE DETAILS** – Two required, one of whom should be your present employer (name, position and email address).  Please ask your referees to email directly in support of your application to [pressfellowship@wolfson.cam.ac.uk](mailto:pressfellowship@wolfson.cam.ac.uk). | | | |
| 1. Referee Name | | | 2. Referee Name |
|  | | |  |
| Further information you think relevant to your application (maximum 500 words) | | | |
|  | | | |
| **DATE / /** | **SIGNATURE** |  | |

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*Aug 2019*