University of Debrecen (FI 17198)

**APPLICATION FORM**

(for the doctoral (PhD) training program)

**Doctoral Committee of Medical Sciences**

**2nd semester of academic year 2020/21**

**I. Personal data**

Name: Sex: male/female

Name at birth:

EHA/Neptun code (only for students graduated from UD):

Place of birth (city, country):

Date of birth:

Mother’s full name: …………………………………Nationality:

Number of ID card *(In case of non-Hungarian citizen, the number and date of residence permit)*:

Permanent address:

Mailing address:

e-mail: phone number:

Workplace:

**II. Qualification, professional experiences**

University degree program (major):

***If graduated already:***

Qualification:

Issuing Institute:

Number/year:

***If not graduated yet:***

Expected date of graduation:

Have you participated previously in any doctoral training program or degree-conferment procedure of University of Debrecen or other university:

a) no

b) yes, please specify (program, university):

Grade point average (GPA) of the last closed 10 semesters (for MSc students GPA of the last 4 semesters):

Knowledge of foreign language(s) [language, level of language examination, number and date of

certificate]:

***Data pertaining to prior scientific activities/achievements (please enclose the underlying documentation, see the list of documents to be enclosed)***:

|  |  |
| --- | --- |
|  | **Number** |
| **Scientific papers in *peer reviewed* journals as first author**   * written in English * written in native language (if different from English) |  |
| **Scientific papers in *peer reviewed* journals as coauthor**   * written in English * written in native language (if different from English) |  |
| **Awarded oral presentations in the national TDK (Students’ Scientific Association) conference** |  |
| **Non-awarded oral presentations in the national TDK (Students’ Scientific Association) conference** |  |
| **Oral presentations in the local TDK (Students’ Scientific Association) conference** |  |
| **Accepted TDK (Students’ Scientific Association) theses as first author** |  |
| **Oral presentations as first author in scientific conferences (excluding local, university-organized\* and TDK (Students’ Scientific Association) conferences)** |  |
| **Poster presentations as first author in scientific conferences (excluding local, university-organized\* and TDK (Students’ Scientific Association) conferences)** |  |
| **Oral or poster presentations as coauthor (excluding local conferences and TDK (Students’ Scientific Association) conferences)** |  |
| **Oral or poster presentations as first author in local (university-organized\*) conferences and events (announced publicly)** |  |
| **Other *in extenso,* non-university\* published scientific papers** |  |

\*refers to the university the applicant graduated from

**III. The doctoral program applied for:**

Name of Doctoral School:

*Name of Doctoral Program (if applicable):*

Title of the proposed research topic

Name and e-mail address of supervisor:

Supervisor’s workplace:

Place of research (if it is different):

Research sources of the supervisor:

***Data pertaining to prior scientific and doctoral training activities/achievement of the supervisor (please enclose the underlying documentation, see the list of documents to be enclosed)***:

Number of students obtained PhD degree under the supervision of the supervisor:

Individual supervising: Co-supervising:

Number of PhD students in the 2nd semester of academic year 2020/21 (both active and suspended state students, for all the doctoral training programs the supervisor participates)

Individual supervising: Co-supervising:

Number of scientific publications in journals with impact factor (according to the Thomson-Reuters list) in the last 3 years (2018-2020):

***Form of PhD training program applied for:***

Full-time (Stipendium or other state-sponsored scholarship) ----- Full time (other source\* or not sponsored) ------- Part-time

\*Please, name the source the scholarship will be provided from:

Is the applicant enrolled in specialist (residency) training in Hungary?

Yes – No

(If yes, please attach the permission issued by the party at fault in residency training.)

Date: …………………………………………….

…………………………………. …………………………………..

Applicant Supervisor

The proposed research plan and the application is supported by the Doctoral School.

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Head of the Doctoral School

The application was registered by the doctoral school, the proposed research topic was uploaded to the database of the Hungarian Doctoral Council ([www.doktori.hu](http://www.doktori.hu)).

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Secretary of the Doctoral School

Infrastructure and facilities required for the successful completion of the PhD project will be provided by the Department.

…………………………………………. ……………………………………

Head of Department Head of Department

(supervisor’s workplace) (place of research, if it is different)

**For part time students:**

I agree with the application.

……………………………………

Head of the workplace

**Documents to be enclosed:**

**Deadline: November 15, 2020**

1. Professional CV
2. Documentation of scientific activities

* list of publications (please, prepare according to the template provided)
* title page of published or accepted scientific papers (if the accepted paper is not available yet in scientific database, please provide the letter of acceptance);
* documentation of conference presentations (Abstract book, conference program book, internet address if available, etc.)

1. Supervisor’s publication list (2018-2020, only papers with impact factor should be presented).
2. List of students obtained PhD degree under the supervision of the supervisor
3. List of present PhD students of the supervisor in the 2nd semester of academic year 2020/21
4. The title of the proposed research topic and research plan (max. 2 page).
5. Certificate of local and national TDK presentations
6. Transcript about closed semesters.
7. Copy of University degree certificate or declaration of the expected date of graduation
8. Copy of document(s) certifying language skills.
9. Certificate of good conduct (only for those who graduated from another university)
10. Applicants enrolled in the specialist (residency) training program in Hungary should attach the written permission issued by the party at fault.
11. Certificate of the transfer of application fee (9000 HUF). The application fee should be transferred in HUF to the following bank account: IBAN: HU13-10034002-00282871-00000000, SWIFT: HUSTHUHB. In the subject of the bank transfer, please give your name and the following text: „PhD application fee, 1H4DBK00PHDF247”

**Template for the publication list**

1. Per reviewed scientific papers in English (authors, title, Journal/Book, page number (if available), date of publication)
2. Per reviewed scientific papers in native language (authors, title, journal/book, page number (if available), date of publication)
3. Other *in extenso*, non-university\* published scientific papers (authors, title, journal/book, page number (if available), date of publication)
4. Oral presentations (authors, title of the presentation, name, venue and date of the conference/event, website- if available)
5. Poster presentations (authors, title of the presentation, name, venue and date of the conference/event, website- if available)