# **DIRAC Undergraduate Thesis Application form**



To apply for the DIRAC Undergraduate Thesis Program:

- 1. complete this form,
- 2. obtain an academic reference/statement of support (see form) from your home institution (the place where you are studying now), and
- 3. attach your CV with picture.

Please send an electronic copy of these two items to the address provided below before the deadline.

# **Personal Details:**

Title		First Name			Surname	
Sex		Date of Birth			Nationality	
Addre	Address:			Email		
				Tel. No.		
				Fax No.		
10/11	14/1 (1					
What languages do you speak?						

#### **Education Details:**

Do you already have some academic degrees? If so which?
1) In which education are you currently enrolled?
2) When do you expect to graduate?
What is your Home Institution?

### **Thesis Details:**

Which thesis proposal are you applying for? (title)
What period (min: 3 months, max: 6 months) do you want your visit to cover?
From:
To:
Explain your choice of thesis proposal:

# **Applications should be sent to:**

Mr. Paul Konijn Departement Elektrotechniek ESAT/PSI-VISICS Katholieke Universiteit Leuven Kasteelpark Arenberg 10 B-3001 Leuven-Heverlee Belgium

E-mail: paul.konijn@esat.kuleuven.be

Tel: +32 (0)16 32 1704 Fax: +32 (0)16 32 1723

# Statement of support for DIRAC Undergraduate Thesis Program



Section 1 on this page should be completed by the applicant. Copies should be passed to the person writing the statement of support, who is asked to complete the remainder of this form and return it in a signed sealed envelope either to the applicant for return together with the main application form, or to mail it directly to the address provided below. In addition, we require electronic copies to be send to the email address provided below.

# Section 1. Applicant's details:

Title	F	irst Name		Surname	
Sex	D	Date of Birth		Nationality	
Scheme applied for:					
Home Institution:					

# Section 2. To be completed by the home institution:

The above named candidate is applying to the DIRAC Undergraduate Thesis Program. We would be grateful if you could provide us with a statement of support for his/her proposal.

Please complete this form as soon as possible, and return it in a sealed envelope, endorsed with your signature over the seal, either to the applicant for return with his/her application form, or to the return address given below. In addition, we ask you to send this form electronically to the email address provided below.

#### Statements and queries should be addressed to:

Mr. Paul Konijn
Departement Elektrotechniek ESAT/PSI-VISICS
Katholieke Universiteit Leuven
Kasteelpark Arenberg 10
B-3001 Leuven-Heverlee
Belgium

E-mail: paul.konijn@esat.kuleuven.be

Tel: +32 (0)16 32 1704 Fax: +32 (0)16 32 1723

# Section 2: To be completed by the home institution

# Referee's details:

Title		First Name	Surname	
Organisation				
Job Title				

Statement of support:		
Continue on separate page	e if required	
Referee's name		
Referee's signature		

#### **Guidance Notes:**

You can apply at any time but applications are only considered after the deadline of May 30<sup>th</sup>, after which you will be informed if you are accepted.

### 1. Length of visits

Visits occupy minimum 3 and maximum 6 months at the host institution.

# 2. Funding available

There is a funding of 1250 Euro/month which can be used to cover travel and living expenses.