IRMC Post-Doctoral Fellowship

**Application Form**

**[**This form should be accompanied with a current CV, Letter of Recommendation from Doctorate Supervisor(s) and a Letter of acceptance by a IRMC Faculty (Mentor)**]**

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| **1. Name in Full:** First 　　　　　　 Middle FAMILY |
| **2. Date of Birth:** Day　/　Month / Year | **3. Nationality:** |
| **4. Gender:** | **5. ID/Iqama/Passport No:** |
| **6. Email:** | **7. Present Position /or Job Status:** |
| **8. Highest Academic Degree (PhD, or equivalent):** |
| Research Area (major): | Date Obtained Day / Month / Year(Applicants must have received their Doctorate degree within 5 years of their application)  |
| Research Area (minor): |
| University: (Country): |
| Supervisor Name: Position: Department: University: Email address**:** Tel: |
| Title for the PhD Dissertation: |
| **9. Qualification (Start from the recent one)** |
| Degree(Type, Major) | Started(month/year) | Degree obtained(month/year) | Full-time / Part-time | University/Institution |
| **10. Experience (Start from the most recent one)** |
| Name of Employer/Institution | Role / type of work | Period (Joined – Left)(Please mention reasons for leaving) |
| **11. Research Interest and Previous Research Output:** | **12. Awards / Achievements:** (indicate title, organization and year and attach copies) |
| **13. Previous Postdoc/fellowships/Research Projects:** (Mention details, sponsor, period and attach copies of certificates) |
| **14. Research Project for IRMC (Title):**(please note that after acceptance the fellow has to formally submit the project via Converis) |
| Objectives |  |
| Abstract |  |
| Keywords |  |
| Field of Research |  |
| Department  | (mention in which department of IRMC this fellowship will be completed) |
| Research Summary |  |
| References |  |
| Expected benefits for UOD | (mention outcome in terms of publication, patent, compounds, etc) |
| Expected Duration |  |
| Ethical Approvals Required | If not required, the proposal will be submitted to UOD-IRB Committee for Ethical Approval. |
| **15. Referees:** (Letter of Support from at least one (1) but no more than three (3) referees in the same research area. Letters should be on the referees’ institution letter head) |
| Name:Department:Position:University:Email: | **Referee 1:** | **Referee 2:** | **Referee 3:** |

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, certify that:

The above information is accurate and correct.

I will submit progress report to the IRMC fellowship Office every six months.

I will publish no less than 3 papers annually in the duration of the fellowship with IRMC and University Of Dammam (UOD) affiliation, with the consent of the Mentor.

I have read and fully understand the terms and conditions listed in Contract.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Checklist**

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| **S. No** | **Document** | **Attached** |
| 1 | Copies of National ID/Iqama/Passport |  |
| 2 | Updated CV |  |
| 3 | Letter of Recommendation from Doctorate Supervisor(s)  |  |
| 4 | Letter of acceptance by a UOD Faculty (supervisor) |  |
| 5 | Letter of Support from at least one (1) but no more than three (3) referees from same research field |  |
| 6 | Academic Degrees /Certificates Copies |  |
| 7 | Additional Supportive Documents |  |