



ANSWER Summer School
on wastewater reuse and current challenges
June 12-23, 2016, Barcelona, Spain



APPLICATION FORM

Name: _____

Last Name: _____

Date of Birth (Day/Month/Year): _____

Nationality: _____

ID/Passport Number: _____

ID/Passport Country of issuance: _____

Address: _____

City/Country: _____

Postal Code: _____

Email: _____

Phone Number: _____

Academic Background

University: _____

City/Country: _____

Date of Enrollment (month/year): _____

M.Sc. date /Ph.D. expected (month/year): _____

Degree: _____

Have you participated in a previous relevant educational/training program? If so, please indicate city, dates and hosting organization:

Other relevant academic information (awards, honors, other accomplishments, summer courses or programs you have participated in):



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Language Level

Native Language: _____

Level of English:

Oral: _____ Intermediate _____ Advance _____ Native

Written: _____ Intermediate _____ Advance _____ Native

Describe your future professional plans and how the ANSWER Summer School can help you improve your personal scientific skills:

Please send the completed Application Form to
toumazis.toumazi@ucy.ac.cy
before **April 30, 2016**