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| **ROTHSCHILD FELLOWSHIPS FOR PHYSICIAN-RESEARCHERS –**  **2025/2026**  **Application Form** |

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| 1. **PERSONAL INFORMATION** | |
| 1. Name (both in English and Hebrew) |  |
| 1. ID number |  |
| 1. Current address |  |
| 1. Mobile phone number |  |
| 1. E-mail address |  |
| 1. Present appointment and place of employment |  |
| 1. **ACADEMIC CAREER** | |
| 1. Secondary (High) school (name and location) |  |
| 1. Academic studies and university degrees. If degrees were conferred with honours, please indicate. | *Year – Degree - University* |
| 1. Academic awards and distinctions |  |
| 1. Title of PhD dissertation and   **name of supervisor** |  |
| 1. Submission/approval of PhD thesis (month/year); if not yet submitted, please provide anticipated date |  |
| 1. Please provide a summary of your dissertation (up to 450 words) | |
| 1. If you don’t have a PhD, please elaborate on your research experience and your main research project to date, including the field and the framework in which you carried out your research. (up to 450 words) | |
| 1. Clinical Field |  |
| 1. Periods of academic study and research outside Israel; please provide date, location, and field of study. |  |
| 1. **PLANNED STUDY AND RESEARCH ABROAD[[1]](#footnote-2)** | |
| 1. Institution(s) abroad where you intend to conduct your studies/research.   List institutions to which you have applied and provide acceptance letters if available. |  |
| 1. When do you plan to begin your research abroad? |  |
| 1. Period of proposed research or study |  |
| 1. Please provide a summary of your present research, if different from questions 12-13 (up to 400 words). | |
| 1. Please describe your planned research activities for your postdoctoral studies (up to 650 words). | |
| 1. Explain the reasons for your choice of country, institution and academic supervisor abroad, and the connection, if any, with your present and planned future work (up to 130 words). | |
| 1. Please describe what you hope to have achieved at the conclusion of your research period abroad (up to 130 words). | |
| 1. **FINANCIAL INFORMATION** | |
| 27. Do you expect to receive a salary, partial salary, scholarship, fellowship, grant, sabbatical allowance, study allowance or any other payment from any source, including your present university / hospital, host university or another source during the proposed period abroad? If so, please provide details of any such allowances. |  |
| 28. You are highly encouraged to apply for a fellowship, scholarship or grant from another institution. Please indicate to which fellowships, if any, you have applied. |  |
| 1. **OTHER INFORMATION** | |
| 29. Please include here any additional information you would like the selection committee to consider. | |
| 1. **REFEREES** |  |
| 30. State the name and affiliation of the people who have agreed to write letters of evaluation. Please indicate your relationship to them. **Your supervisor(s) should be listed first.** | 1. Name – Affiliation – relationship |

I have read the Notes to Candidates in their entirety, confirm that I shall adhere to the stipulations contained in the document and agree to provide any further information which the Rothschild Fellowships Committee may deem necessary to evaluate my candidacy (**please check the box to indicate your agreement**).

1. Please take into consideration that the Committee Members come from a variety of disciplines, and it is important that you write in a language accessible to non-specialists. [↑](#footnote-ref-2)