



LUND
UNIVERSITY

To be sent to Head of department at the
department in question

APPLICATION FOR ADMISSION TO POSTGRADUATE STUDIES AT THE FACULTY OF SCIENCE

Subject for postgraduate studies	ref no
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Personal details

Last name, First name	Personal reg. no. (yy-mm-dd-xxxx)
Address	<input type="checkbox"/> Female <input type="checkbox"/> Male
Postal code, Town/City	Telephone number
E-mail address	Citizenship <input type="checkbox"/> Swedish <input type="checkbox"/> Other (specify below)
Former last name, if any	

Education

<input type="checkbox"/> Degree/courses at Lund University	Higher education credits	Date
<input type="checkbox"/> Degree/courses from another Swedish university or a university/college in another country. <i>Copy of degree certificate/Course grades is to be enclosed</i> Name of university/college	Country	

THIS SECTION IS APPLICABLE ONLY FOR ADMISSION TO STUDIES WITH OTHER FINANCING THAN STUDY GRANT

Other qualifications

Degree project, title
Other education
Professional experience
Other qualifications or information
<i>Please enclose attested copies of your CV, degree project and other documents of merit relevant to the application.</i>

Application for

<input type="checkbox"/> PhD <input type="checkbox"/> Licentiate <input type="checkbox"/> Change of subject – Discontinuance of the former subject is to be registered in LADOK <input type="checkbox"/> Part-time studies <input type="checkbox"/> Later part of education	Postgraduate subject
	Department
	Faculty

Present affiliation to any other university, if any

Name of university/college, nature of affiliation

Signature

Date

Signature

DECISION (TO BE COMPLETED BY THE DEPARTMENT)**Admission to postgraduate studies**

Admitted to postgraduate studies in the following subject

Subject code

In the following cases, the decision will be made by the Faculty Board:

- Suggested for PhD studies with other financing than study grant.
 Suggested for a licentiate, specify the reason.
 Suggested for admission to part-time studies or later part of education, specify reason.

Department

Division

Mail stop

Faculty

Date of admission (start of studies)

Principal supervisor

Deputy supervisor

Deputy supervisor

Check the boxes to verify that the following steps have been taken:

- Admission with financing other than study grant, admission to licentiate, admission to part-time studies or later part of education (written statement with motivation to be sent by the head of department to the Faculty Board).
 Individual study plan has been established and filed at the department.
 A copy of this signed form is to be sent for registration by the department to Ladok, Studerandeenheten, hst 31
 The original document is to be filed in the diary.
 A copy is to be sent by the department to the student.

Information and signature

Information can be obtained from:

E-mail and phone number:

Date of the decision

On behalf of the Faculty Board, Head of Dept.

Name of signatory (please print)

DECISION (TO BE COMPLETED BY THE FACULTY OFFICE)**Admission to Licentiate or admission with financing other than study grant**

- Admitted to studies with financing other than study grant
 Admitted to licentiate
 Admitted to part time studies or later part of education
 Application rejected

Date of the decision

On behalf of the Faculty Board, Dean

Administrator