

ADDITIONAL INFORMATION

InSciTe

Name applicant:
Student at:
Employer:
Current position : (Master, PhD, PD, academic staff, industrial staff, other)
Are you an InSciTe project participant: <input type="checkbox"/> yes <input type="checkbox"/> no
Field of activity: (bio-medical, biobased, other)
Choice of course: <input type="checkbox"/> IP in Innovative Science <input type="checkbox"/> IPR Intensive Entrepreneurship <input type="checkbox"/> both
If you chose to participate only in one of the 2 courses, can you give the reason for your choice and the reason for not participating in both courses:
Dietary requirements: