



Application Form

Applicant Information

Full Name: _____ Date: _____
First and Last Name

Address: _____
Street Address *Apartment/Unit #*

City, State *Zip/Postal Code* *Country*

Email: _____ Phone: _____

Affiliation Information

University: _____ Department: _____

Supervising Faculty Name: _____

Supervising Faculty Email: _____

Degree Level Sought – select all that apply: _____ **MA / M. Eng. / MS / PhD**

Summary

Please explain in up to 200 words why you apply to that award and why in your opinion your proposal should be chosen

Required Documentation

1. Attach the link of the ECPE event you want to visit.
2. University affiliation documentation.
3. Attach the abstract of your thesis or paper.

Please send completed forms and required documentation to info@epcia.org. Please note that Terms and Conditions of Participation [available via https://www.eusemiconductors.eu/sites/default/files/uploads/EPCIA_StudentAward_TermsConditions.pdf] apply, which are expressly accepted by submitting this application.