



**PhD Program in Biomedical Ethics and Law/Medical Track  
Application form**

**Personal data**

Add passport photo and all your documents

Family name	<input type="text"/>	First name	<input type="text"/>
Middle name(s)	<input type="text"/>	Date of birth	<input type="text"/>
Titel	<input type="text"/>	Place of birth	<input type="text"/>
Email	<input type="text"/>	Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address / Street	<input type="text"/>	City	<input type="text"/>
Postal code	<input type="text"/>	Country	<input type="text"/>
Nationality	<input type="text"/>	Phone (work)	<input type="text"/>
Current work address	<input type="text"/>	Phone (mobile)	<input type="text"/>

Are you currently living in Switzerland  No  Yes If yes, where?

Postal code / City

Address / Street

What is your permit status?   EU/EFTA  No EU/EFTA or swiss permit status  
(Please enclose a copy)

**Education**

Institution (University, College)	Location	Dates
<input type="text"/>	<input type="text"/>	<input type="text"/>
Major Field of Study	Degrees & Diplomas	Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>
Institution (University, College)	Location	Dates
<input type="text"/>	<input type="text"/>	<input type="text"/>
Major Field of Study	Degrees & Diplomas	Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>
Institution (University, College)	Location	Dates
<input type="text"/>	<input type="text"/>	<input type="text"/>
Major Field of Study	Degrees & Diplomas	Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>

**Honors, scholarships, prizes and awards**

Title	Dates
<input type="text"/>	<input type="text"/>
Awarding institution, organization etc.	
<input type="text"/>	
Title	Dates
<input type="text"/>	<input type="text"/>
Awarding institution, organization etc.	
<input type="text"/>	



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**Professional experience**

Institution (University, College, Firm)    Location    Dates  
\_\_\_\_\_

Position held  
\_\_\_\_\_

Institution (University, College, Firm)    Location    Dates  
\_\_\_\_\_

Position held  
\_\_\_\_\_

Institution (University, College, Firm)    Location    Dates  
\_\_\_\_\_

Position held  
\_\_\_\_\_

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**Publications**

If you have any academic publications please list these here and submit a hard copy of selected publications along with the application (no more than three).

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\_\_\_\_\_  
\_\_\_\_\_

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**Essay**

Please provide a short essay (max 2 pages in attachment) describing a research idea that you would be interested in working on. Include also a section on the methodological approach that you would consider most suitable for addressing your research question.



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**Statement of purpose**

Provide a short summary about your interest in biomedical ethics, your experience so far with biomedical ethics issues, why you want to pursue a PhD and what your career plans are. Do not exceed this page.

A large, empty yellow rectangular area intended for the applicant to write their statement of purpose.

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**Other interests and hobbies**

Please list your other interests that are not directly related to your studies.

A large, empty yellow rectangular area intended for the applicant to list their other interests and hobbies.



**Funding**

- Do you have funding for your PhD?  No  Yes
- if yes, please indicate source:
- if no, have you applied for funding:  No  Yes
- If no, are you planning to and where?
- Are you applying for a full-time or a part-time PhD Program?

**Letters of Recommendation**

I have requested letters of recommendation from:

- a. Title  Name  Affiliation
- b. Title  Name  Affiliation

Please have letters emailed directly to [ibme@ibme.uzh.ch](mailto:ibme@ibme.uzh.ch)

**How did you learn about this program?**

- Program's website  Friends  Colleagues  Other students  Faculty members
- Advertisement in scientific journals, please specify:
- Other; please specify:

**I have included**

- Photo  2 reference letters
- Copies of academic degrees  Essay
- Copies of publications  Copy of secondary school degree
- Proof of English proficiency
- Other:

Date:  Initials:  Signature: \_\_\_\_\_

(no signature required if submitted electronically)