

iGRAD, Geb. 26.31.U1, R.45
Mathematisch-Naturwissenschaftliche Fakultät der Heinrich-Heine-Universität Düsseldorf
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Chairman: Prof. Dr. Johannes H. Hegemann
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Membership application form: iGRAD postdocs

1. Personal Data

Fields marked with * are mandatory fields.

1.1 Personal Information

Title*: Mr. Mrs.

Title(s) (and others)*:

Family Name*:

First Name*:

Middle Name(s):

Date of Birth (dd/mm/yyyy)

Nationality(ies):

Place of Birth (City, Country):

Date of doctoral examination (mm/yyyy)*:

Doctoral subject*:

1.2 Address and Contact Information

Please fill in reliable phone number, email and address information which will be used for administrative purposes and mail correspondence. If applicable, please provide the address of your institute. Fields marked with * are mandatory if corresponding address is your institutional address.

Institution (e.g.: Heinrich Heine University Düsseldorf, Forschungszentrum Jülich, University Hospital Düsseldorf)*:

Institute/Clinic (e.g.: Institute of Biochemistry, Institute for Informatics, Institute for Laser and Plasmaphysics)*:

Group/Department/Chair (e.g.: Chair of Applied Mathematics, Workgroup of Prof. XYZ)*:

Address Supplement(s) (e.g.: Building No., Room No.):

Street, Number*:

ZIP Code*:

City*:

Dialling Code and Phone Number 1*:

Dialling Code and Phone Number 2:

Dialling Code and Fax Number:

Email Address*:

1.3 Additional Contact Person(s)

If agreed to by the respective persons – who could be contacted by iGRAD in case of absence (e.g.: Secretary, etc.)? Please give information in the following order: Titel, Name, Function, Email Address, Phone Number.

2. Affiliation to Postdoc-Program

2.1 Are you member of a 'postdoc program'?

Are you member of a third-party funded 'postdoc program, which will cover the costs of your participation in iGRAD courses and events which are not for free?

No Yes (please name):

3. Application for iGRAD membership

Hereby, I, as a postdoc, apply for membership in the Interdisciplinary Graduate and Research Academy Düsseldorf (iGRAD). My membership shall be valid for the duration of my affiliation to the Faculty of Mathematics and Natural Sciences of the Heinrich Heine University Düsseldorf, unless membership is cancelled earlier in written form. I know that - unless workshops are explicitly denoted as free of cost - the costs for iGRAD courses have to be covered either by the institute I'm working for or by adequate program funding. I know that I can only participate after the cost coverage has been confirmed by the person responsible for the according cost center. Additionally, I, as a scientist at HHU Düsseldorf as well as a potential supervisor, commit myself to especially adhere to the "Fundamental Principles for Safeguarding Good Scientific Practice at Heinrich Heine University Düsseldorf" (cf.: "Grundsätze zur Sicherung guter wissenschaftlicher Praxis an der Heinrich-Heine-University Düsseldorf vom 24. Februar 2014" in: Amtliche Bekanntmachungen der HHU D 7/2014 and 11/2014).

City, Date:

Name and Signature:

4. Data Privacy Agreement

Data privacy is guaranteed by iGRAD according to the North Rhine-Westphalia Protection of Data privacy law (Datenschutzgesetz NRW). All statistical analyses will strictly be anonymized. With my signature I agree to the storage and processing of my personal data for application and administration purposes for the duration of my iGRAD membership. I especially authorize that all information given in this form can be transferred to administrative databases and be processed electronically. Furthermore, I agree to the collection, storage and processing of my personal data during my iGRAD membership, pertaining to participation in iGRAD meetings and events, and my possible activities as supervisor, as far as required for administrative purposes.

City, Date:

Name and Signature:

Please check if all information are filled in correctly/completely and send the PDF-form twice:

1. via email to: *igrad@uni-duesseldorf.de*
2. and signed via regular mail to:

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