

WUT-NIMS Summer Internship Program Student Form

Name (in English) <small>*As appeared on passport</small>	First Name		Family Name	
Nationality		Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth (e.g. 1 Dec 1981)		Age		
Address for correspondence				
Contact details	Phone		E-mail	
Name of University				
Department				
Current academic year (e.g. B4, M2, D1)		Date of Admission (e.g. Mar 2015)		Date of Expected Graduation (e.g. Mar 2017)
Desired duration of internship	From		to	
Supervisory professor details (Professor or Associate professor)	<input type="checkbox"/> Male <input type="checkbox"/> Female	First Name		Family Name
	Affiliation			Position
	Phone		E-mail	

Educational Background

School names (from high school)	From	To	Diploma/ Degree awarded	Major
	<small>(e.g. Mar 2015)</small>			
Future Plan after Ms. Course	PhD course · finding employment · Other ()			

1. Describe your motivation applying to this program.

2. Describe your current research at your university.