

ITACET Foundation - c/o EPFL - Bat. GC - D1402 - Station 18 - CH-1015 Lausanne Tel. + 41 21 693 08 67 - Fax + 41 21 693 41 53 secretariat@foundation.itacet.org - www.foundation.itacet.org

## **ITA endorsed Post-Graduate Master Courses**

## FINANCIAL SUPPORT APPLICATION FORM

1. Personal Infor	mation (Please t	type or print o	:learly)		
Name:					
	irst)				
Salutation (Prof./	Dr./Mr./Mrs./Ms.)	):	_		
Company/Organ	ization/University:	<u> </u>			
Position:					
Job Responsibili	ty:				
	ears, Date of Birth				
_	:				
	-				
E-mail Address:					
Fax:	Fax:Tel:				
2. Financial Supp	ort Requiremen	t Details (ple	ease tick as a	ppropriate)	
( ) Air tickets	Total cost:		Required am	ount:	
( ) Tuition fees	Total cost:		Required am	ount:	
( ) Living expenses	Total cost:		Required am	ount:	
3. Please write ma	ain reason to ap	ply for Fina	ncial Support	:	

4. Please include recommendation letter from relevant organization or your employer describing how the post-graduate master course will be beneficial to applicant and the organization applicant is working for.

Email this form with the acceptance letter to: secretariat@foundation.itacet.org