

APPLICATION

1. Applicant

Surname	First name
Address	
Postal Code	Postal address
Phone number	E-mail address
Accepted as a post-graduate at the Faculty of Law at Stockholm University (date)	

2. Tutor

Surname	First name
Address	
Postal code	Postal address
Phone number	E-mail address

3. About the research project

The research project

Brief description of the research project (a more extensive description of the research project can be added in the appendix).

Description of the research projects status (a more extensive description can be added in the appendix).

Motivation etc.

Amount applied for in SEK:

Description of what the applied means will finance.

4. Appendixes

Specify down below which appendixes, in addition to the mandatory, that is part of your application.

Copy of grades from Master of Laws (mandatory)	Appendix 1
Information on admission regarding the postgraduate education (mandatory)	Appendix 2

5. Personal data etc.

The personal data that you submit in this application, or is registered within the scope of the appointment procedure, will be processed by the person in charge of the personal data, the Independent Foundation, to administer the appointment procedure.

The personal data may be complemented through gathering from private and public registers.

The personal data will be dispensed to Wesslau Söderqvist Advokatbyrå for stated reasons, to administer the appointment procedure on behalf of the foundation. The information may be dispensed to authorities according to the General Data Protection Regulation (GDPR).

If you wish to obtain more information regarding the personal data that the foundation or its assistant handles, you may send a written request undersigned to

Stiftelsen Independent
c/o Wesslau Söderqvist Advokatbyrå
Box 7836
103 98 STOCKHOLM

To the address stated above you also write if you want to request a correction of inaccurate or incomplete personal record.

6. Certification etc.

I comply to my personal data being processed as stated above.

By signing this application below I verify that the information left in this application is correct and that I am admitted as a postgraduate student at the Faculty of Law at University of Stockholm. If any information is incorrect I undertake to, if the foundation request it, repay what has been received.

City and date	Signature
	Clarification of signature print name

The application shall be sent to the address stated below no later than **November 15 2019**.

Stiftelsen Independent
c/o Wesslau Söderqvist Advokatbyrå
Box 7836
103 98 STOCKHOLM

The application, including appendixes, may be sent by e-mail to the address stated below.

Questions may be sent to Caroline Olausson via e-mail caroline.olausson@wsa.se or by phone, +46 8 407 88 00.

Please submit your application!