



Wolfson College, Cambridge
Press Fellowship Programme

Application Form

SURNAME

FORENAMES

ADDRESS FOR CORRESPONDENCE

FAX

E-MAIL

TELEPHONE

DATE OF BIRTH

PLACE OF BIRTH

NATIONALITY (CITIZENSHIP)

EDUCATION

Secondary School:

Dates:

From:

To:

College, University or other further education (if any):

Dates:

From:

To:

Formal Qualifications – e.g. Degree, Diploma (give brief details)

NAME AND ADDRESS OF PRESENT EMPLOYER

FAX

TELEPHONE

CURRENT POSITION HELD BY YOU (name of publication etc.)

PREVIOUS EMPLOYMENT (list most recent first)

Employer	Dates	Position held

PLEASE STATE DETAILS OF COUNTRIES VISITED IN CONNECTION WITH YOUR WORK/LEISURE. Give dates and details of scholarships etc.

PLEASE TICK WHICH OF THE FOLLOWING PERIODS YOU WOULD BE AVAILABLE
If you have a preference, please state by indicating 1,2,3.

Apr-Jun 2008 Sept-Dec 2008 Jan-Mar 2009 Apr-Jun 2009

WOULD YOU WISH TO BE ACCOMPANIED BY YOUR SPOUSE/PARTNER?

Accommodation for a couple MAY be available, but the extra cost would have to be met by you, e.g. travel, accommodation etc. We regret that we cannot accommodate children.

PLEASE GIVE DETAILS OF ANY PHYSICAL DISABILITIES OR ANY SPECIAL DIETARY REQUIREMENTS

PLEASE GIVE NAMES AND ADDRESSES OF TWO REFEREES (ONE OF WHOM SHOULD BE YOUR PRESENT EMPLOYER)

--	--

ASK YOUR REFEREES TO WRITE DIRECTLY TO US IN SUPPORT OF YOUR APPLICATION.

Date:

Signature

--