**WCTRS-Y Initiative Ed-5 Activity Y-II Application Form January 2025**

Please complete, convert to PDF and send to WCTRS Secretariat: [wctrs@ucdavis.edu](mailto:wctrs@ucdavis.edu)

Read carefully and fill **precisely** as requested  **Deadline 01/ Mar / 2025**

**Only for Young\* Members of WCTRS; July 2023 /July 2026**

**and newly registered Young\* Members; Jan 2025 / July 2026**

\* Age less than 35 years until 6 July 2026; the opening of WCTR-17, Toulouse, France

1. **Personal; Information**

Name: . . . . . . . . . . .

Date of Birth: (DD/MM/YYYY)

Nationality: . . . . . . . . .

Telephone: . . . . . . . . . .

e-mail: . . . . . . . . .

1. **PhD Information:**

Title of Thesis: . . . . .

Planned Abstract of the thesis (attach 500 words):

University: . . . . . . . .

Name:. . . . .

Address:

Date of registration: (DD/MM/YYYY)

Expected date of granting the degree: (DD/MM/YYYY)

Supervisor(s):

1. . . . . . . . . . . . .
2. . . . . . . . . . . . .
3. . . . . . . . . . . . .
4. **Research Topic for which you are applying for the WCTRS PhD Students’ Grants**

Title: .. . . . . . . . . . .

1. **Does the proposed research contribute to the PhD thesis?** Yes ( ) No ( )
2. **Attach Research Proposal**:(Not more than 1000 words, font, 12, Times New Roman)

Clear objective(s), importance, data, methodology, expected results and time plan from the start till submission of paper based on the research topic to WCTR 17, Toulouse July 2026**.** Indicate if the research contributes to the PhD, how it does so.

1. **Other Attachments:**
2. Certified letter from your University that you shall be enrolled in the PhD programme at least until 6 July 2026.
3. CV strictly in not more than 300 words.
4. A statement from the lead supervisor of the PhD indicating his/her agreement of the submission of this application for WCTRS PhD Students’ Grants.
5. A recommendation letter from a professor other than the PhD supervisor(s).

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I have read the details and eligibility conditions in the Call for Applying to join WCTRS-YI Ed-5 posted on WCTRS Website and confirm that I am eligible for Activity Y-II of the initiative.

**Name:** **Date:** **Signature:**