

DEUTSCH-BRITISCHE GESELLSCHAFT

DEUTSCH-BRITISCHE GESELLSCHAFT E.V.
PARISER PLATZ 6

10117 BERLIN

PLEASE TYPE

APPLICATION FORM

YOUNG KOENIGSWINTER CONFERENCE

PLEASE SEND
THIS FORM TO:

HEADOFFICE@DEBRIGE.DE

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GESELLSCHAFT E.V.
PARISER PLATZ 6 ---
10117 BERLIN
FON +49 30 203 985 0
FAX +49 30 203 985 16
WWW.DEBRIGE.DE

PERSONAL DETAILS

LAST NAME	<input type="text"/>	FIRST NAME	<input type="text"/>
GENDER	<input type="text"/>	DATE OF BIRTH (DD.MM.YYYY) ¹	<input type="text"/>
AGE AT TIME OF THE CONFERENCE	<input type="text"/>	NATIONALITY ²	<input type="text"/>

CONTACT DETAILS

POSITION	<input type="text"/>	COMPANY/ ORGANISATION	<input type="text"/>
ADDRESS	<input type="text"/>		
POSTAL CODE	<input type="text"/>	TOWN	<input type="text"/>
FAX	<input type="text"/>	COUNTRY	<input type="text"/>
PHONE	<input type="text"/>	eMAIL	<input type="text"/>

¹ PLEASE NOTE THAT
WE CAN ONLY CONSIDER
APPLICANTS BETWEEN
25-32 YEARS OF AGE
AT THE TIME OF THE
CONFERENCE

² PLEASE NOTE THAT
WE CAN ONLY CONSIDER
APPLICANTS WITH EITHER
GERMAN OR BRITISH
(COMMONWEALTH)
CITIZENSHIP

Please do not forget to submit your accompanying letter as well as your CV together with this application form.

DATE, SIGNATURE