

**PROGRAM IN RESEARCH METHODOLOGY AND RESEARCH ETHICS**  
**APPLICATION FORM FOR 2020**

Please PRINT clearly or TYPE.

**PART I: PERSONAL INFORMATION**

**Name (as it appears on your passport)**

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Family/Surname	First	Middle
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**Title:**  
**Postal Address:**

**Telephone Numbers:**  
**Home:** Country code: City code: Number:  
**Mobile:** Country code: City code: Number:

**E-mail:**

**Gender:**      Male  Female     **Date of Birth:**    \_\_\_/\_\_\_/\_\_\_  
  Month   Day     Year

**Place of Birth:** (city/country) \_\_\_\_\_ **Citizenship:** \_\_\_\_\_

**PART II: PROFESSIONAL INFORMATION**

**Job Title:**

**Position:**

**Institution Name:**

**Job Postal Address:**

**PART III: EDUCATIONAL BACKGROUND**

**Please list in chronological order all educational experiences leading to an academic degree.**

<b>College/University</b>	<b>City, Country</b>	<b>Dates Attended</b> <small>(Mo./Yr. To Mo./Yr.)</small>	<b>Discipline</b>	<b>Degree</b>	<b>Date Degree Earned</b> <small>(Month/Year)</small>

**PART IV: DESCRIPTION OF PRESENT WORK AND RESEARCH EXPERIENCE:**

**PART V: EXPERIENCE ETHICS AND RESEARCH ETHICS**

Include any experience of the following type:

1. Ethics Review Committee
2. Teaching Ethics
3. Attending workshops/conferences/courses

**Part VI: FUTURE ACTIVITIES IN RESEARCH ETHICS**

Please describe how the program will help you in your career.

**PART VII: OTHER APPLICATION MATERIALS REQUIRED**

WITH YOUR APPLICATION – PLEASE ATTACH THE FOLLOWING

1. A CURRICULUM VITAE (not more than five pages)
2. Copy of your passport
3. Please have TWO individuals (one of whom holds a high position in your institution (e.g., President, Dean, Vice-Dean) send letters of recommendations to:  
[hsilverm@medicine.umaryland.edu](mailto:hsilverm@medicine.umaryland.edu)

DECLARATION: I declare that this information is completely accurate and without falsifications.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**CLOSING DATE FOR APPLICATIONS is [Feb 28<sup>th</sup> 2020](#)**

Application materials can be submitted by **Email to:**

Henry Silverman: [hsilverm@medicine.umaryland.edu](mailto:hsilverm@medicine.umaryland.edu)