



The Eduardo Saccone PhD Scholarship in Italian Literature

University College Cork APPLICATION FORM 2019-2020

Please consult the Terms and Conditions of the Scheme, complete this application form in accordance with the instructions and check that you have included the following:

- | | Yes | No | N/A |
|---|--------------------------|--------------------------|--------------------------|
| ▪ Application Form and Supporting Materials | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ CV | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Writing Sample | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ▪ Academic Transcripts. These transcripts are not returnable.
(Graduates of University College Cork do not need to supply transcripts) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

The electronic application must be received by the deadline, and a hard copy must be sent with a postmark of 10 May 2019 in order to be considered. Applications should be word-processed, not handwritten. Applications which are incomplete will not be assessed. Please submit the completed form and supporting documentation in electronic form and hard copy (postmarked) by

10 May 2019 to:

Department of Italian
School of Languages, Literatures and Cultures
O’Rahilly Building
University College Cork
Cork, Ireland

italian@ucc.ie

Applications received after this date will not be accepted. Applications sent by fax will not be accepted.

FOR APPLICANT
Name:
Title of Project:
UCC Student Number <i>[where appropriate]:</i>

1. **NAMES:** *(Surname, First Name(s))*

2. **DATE OF BIRTH:**

3. **CONTACT ADDRESS:**

4. **TEL:**

5. **E-MAIL:**

7. **UNDERGRADUATE CAREER:**

(including details of any qualifying examinations to enter postgraduate studies.)

Name of Institution(s) Attended:	Years Registered From: To:	Title of Qualification(s):	Subjects:	Awarding Institution(s):	Level/ Class/ Grade:	Date Conferred:

8. **POSTGRADUATE CAREER: DEGREES/DIPLOMAS**

(insert projected date of initial registration on the PhD/PhD Track)

Name of Institution(s) Attended:	Years Registered From: To:	Title of Qualification(s):	Subjects:	Awarding Institution(s):	Level/ Class/ Grade:	Date Conferred:

9. PUBLICATIONS/ACCEPTED FOR PUBLICATION:

(please insert full bibliographical entry for each item).

Title

Where Published/Submitted

10. PLEASE LIST GRANTS AND SCHOLARSHIPS ALREADY AWARDED AND ALSO THOSE APPLIED FOR IN 2018 AND 2019. *(Failure to disclose such awards will result in disqualification.)*

11. OTHER RELEVANT ACADEMIC OR PERSONAL DETAILS:

12. TITLE AND SHORT DESCRIPTION OF RESEARCH PROJECT: *(no more than 50 words).*

13. RESEARCH SUPERVISOR AND DEPARTMENT/SCHOOL IN UNIVERSITY COLLEGE CORK WHERE RESEARCH IS BEING CARRIED OUT:

14. RESEARCH PROJECT: *Please include the following, making sure to respect the word limits:*

a. Description of the project [maximum length 1,000 words]

b. Outline of your research methodology [max. 300 words]

c. Outline of why your research merits the support of the Eduardo Saccone PhD in Italian Literature Scholarship scheme [max. 300 words]

d. Research plan, including timetable of research, necessity of research visits to other institutions, locations, resources needed, e.g. library resources, equipment, etc. [max. 300 words]

15. COUNTRY OF CITIZENSHIP

E.U. Country
(Please Identify)

Non E.U. Country
(Please Identify)

16. COUNTRY OF LEGAL AND PERMANENT RESIDENCE FOR AT LEAST 3 OF THE LAST 5 YEARS

E.U. Country
(Please Identify)

Non E.U. Country
(Please Identify)

PLEASE STATE WHERE YOU FOUND OUT ABOUT THIS SCHOLARSHIP:

DECLARATION BY APPLICANT

I declare that the above particulars are correct and understand that the circulated “Terms and Conditions” of this scheme apply. I accept that failure to abide by the “**Terms and Conditions**” may disqualify me from this scheme.

Signature of Applicant: _____ Date: _____