

2024 NICHOLSON POSTDOCTORAL FELLOWSHIP
THE ROCKEFELLER UNIVERSITY & KAROLINSKA INSTITUTET
Application Cover Page

Applicant Information

First Name: _____ Last Name: _____
Title: _____ Date of Dissertation: _____
Phone: _____ Email: _____
Address: _____

What are the approximate dates that you plan to spend at Karolinska Institutet (up to 24 months):

Proposal Title:

Letters of Recommendation

<u>Name of Prospective Head of Laboratory at Karolinska Institutet</u>	<u>Method of Submission (check one)</u>
1. _____	<input type="checkbox"/> With application <input type="checkbox"/> By referee

<u>Names of Other Referees and Institutions</u>	<u>Method of Submission (check one)</u>
1. Lab Head: _____	<input type="checkbox"/> With application <input type="checkbox"/> By referee
2. Other: _____	<input type="checkbox"/> With application <input type="checkbox"/> By referee

Please send the completed form to lise-lotte.vedin@ki.se

For questions, please contact Lise-Lotte Vedin

at the above email address, or call at 08-524 871 11.

Deadline: Monday, December 16