



**Hiob Ludolf Centre Summer School
for Ethiopian Studies**
Hamburg, 25 to 30 September 2017
Application Form

General information

Title _____

First name / Middle name _____

Last name _____

Address 1 _____

Address 2 _____

Country _____

Email _____

Date of birth _____

- Category graduate student
 postgraduate student
 young professional

Field of study or discipline _____

- Grants I am applying for a grant
 I am not applying for a grant

I hereby obligingly enroll for the Summer School in Ethiopian Manuscript Studies

Date _____

Signature _____