

EAST AFRICAN COMMUNITY

EAST AFRICAN HEALTH RESEARCH COMMISSION



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THE YOUNG EAST AFRICAN HEALTH RESEARCH SCIENTISTS FORUM (YEARS' FORUM)

APPLICATION FORM

- Download the [application form](#)
- Submit the completed application form through the email: eahrc-admin@eachq.org
- Only applicants who fully complete the application form will be considered.

| General Information | |
|--|--|
| First/Given Name (as it appears on the passport or national identification card) | |
| Surname or Family name (as it appears on the passport or national identification card) | |
| Gender: Male, Female | |
| Date of Birth (dd/mm/yyyy) | |
| City/Town/Village of birth | |
| Country of birth | |
| Country of legal Citizenship | |
| Current country of residence | |
| Contact information | |
| Email address which is checked regularly | |

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|---|--|
| Primary phone number | |
| Another phone number (this could be a parent, spouse, other family member, or work phone number) | |
| Whatsapp number | |
| Twitter account | |
| Skype ID | |
| Facebook ID | |
| Education and Languages | |
| Educational background: highest level of education completed, and course of study | |
| University where registered for PhD | |
| Year of registration | |
| PhD research thesis title | |
| Supervisor (names and contacts) | |
| Languages: English language skills (Basic, Intermediate or Advanced) as accurately as possible: B,I,A | |
| Employment/Professional experience | |
| Organization/Company Name | |
| Current position/Job Title | |

- **Annexes** (submit scanned documents through the email: eahrc-admin@eachq.org)
- Official signed letter by the University of Registration for PhD. NB: official headed-paper, name of the officer, signature, and stamp.
- Official signed letter from your employer. NB: official headed-paper, name of the officer, signature, and stamp
- CV : Current position/Job Title, Key Responsibilities and Achievements (100 words maximum)

- **Certification**

In order to participate in the YEARS Forum, I understand that I must meet the minimum eligibility requirements for admission, that I must be a citizen and resident of one of the EAC partner states, and that my admission is subject to the determination by the selection committee. I have read, understand, and will comply with the terms and conditions of the YEARS's Forum. I hereby certify that I have completed this application fully and accurately to the best of my knowledge. I understand that any falsification, omission, or concealment of material fact may subject me to disqualification.

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|-------|-----------|
| Names | Signature |
|-------|-----------|