

Application for Admission to Peer-Mentoring

1 - Personal Information

Title, Last Name*: First Name*:	Contact address*: business private
Date of Birth*:	Road*, house number*:
Are you a Ph.D. candidate?*: yes no Certificate of enrolment (not applicable for postdocs)*:	Zip code*, City*: Address suffix:
When did you finish your Ph.D.?* Institute of your Ph.D./postdoc*:	

2 - Career

Please give a brief outline of your career (vocational training or academic education).

Please, briefly describe your Ph.D. project, preferably including start date and, for postdocs, Ph.D. degree, university, subject, supervisor (brief description).

If you are a Ph.D. candidate: Please briefly describe your current research project(s) (indicating when you started and your affiliation with an institute/subject).

^{*} The fields marked are mandatory.

Please, briefly outline your current work and qualification situation (scholarship/job, further career prospects, etc.).
3 - Motivation and Goals for Peer-Mentoring
Have you participated in a mentoring before? If yes, was this a peer- or a one-to-one mentoring?
Please outline your personal goals for the peer-mentoring programme. What would you like to achieve for yourself in your peer-mentoring group?
On which topics would you like to get support and advice from your future peers in a peer-mentoring group?
What should we consider when forming peer-mentoring groups, resp. with regard to your peers?
Which support do you expect from the Graduate Academy?
What else would you like to share with us?

4 - Privacy Policy

In accordance to the European Data Protection Regulation (DSGVO), we inform you that we store and process the data you provide during the application process for further administration of the peer-mentoring programme.

The subject of data protection is your personal data, i.e. individual details about your personal and material circumstances, which you provide when you register for mentoring. This information will of course be treated confidentially and will only be used and passed on with your consent.

The collection and processing of data requires your consent. By sending the application via e-mail and/or mail, you confirm that you agree to the collection, storage and usage of your data for the named purpose by the Graduate Academy of Leibniz University Hannover. You have the right to revoke your consent at any time without giving reasons. Please send this revocation in written form to graduiertenakademie@zuv.uni-hannover.de.

Place, Date	Signature (handwritten)

Please send your registration form as a pdf file with the keyword "Peer-mentoring" to graduiertenakademie@zuv.uni-hannover.de.

If you have any questions, please do not hesitate to contact us.

Your contact person at the Graduate Academy: Dr. Nadine Pippel Tel. +49 511 762 19784 nadine.pippel@zuv.uni-hannover.de

ANLAGEN:

Curriculum vitae Certificate of enrolment (only for Ph.D. candidates)