



**Var vänlig texta tydligt!**

Full name		Personal/Social security nr	Citizenship
Address			
Phone number		E-mail	
Next of kin (address and phone number)			
Current university studies		Name of university you are enrolled in	
Level of studies	Major		
Host country	Title of MFS study / thesis		
Planned length for the field study .....weeks (minimum 8 weeks)	Start date	End date	
Planned length for writing the thesis .....weeks	Start date	End date	
Name, title of supervisor in Sweden	Department/Institution and address		Phone number/E-mail
Name, title of contact person in field	Institution or equivalent and address		Phone number/E-mail
Applied for MFS-scholarship at other universities? Yes/No If yes: Please list which university/universities		Date:	
Previously received MFS-scholarship at other universities? Yes/No If yes: Please list which university/universities		Signature:	

Attach the following documents to the application form:

Send complete application form to:

**Mälardalens Högskola  
Ledningskansliet  
Box 883  
721 23 Västerås**

- Project description (approximately 3 pages in English) and alternative plan
- Budget plan
- Transcript of records (Ladok)
- Certificate from the supervisor at MDH – support for the thesis: professional relevance, choice of method, demarcation, etc.
- Certificate from contact person in field/host country
- Copy of passport or birthcertificate where citizenship is indicated
- PUT-document if applicable

**Please note! Incomplete applications will not be processed!**