**INSCHRIJFFORMULIER AIO-CURSUS / REGISTRATION FORM AIO COURSE**

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| **Survival Analysis** | | **0830** |
| **GEGEVENS AANMELDING / REQUIRED INFORMATION FOR APPLICATION** | | |
| Achternaam/Family name |  | |
| Voornaam/First name |  | |
| Geslacht/Gender |  | |
| (UMCard) UMkaart: ID nr./personal nr. | UM 700…………… | |
| Vakgroep & Faculteit/Department & Faculty |  | |
| School, *please name* (Nutrim, Grow etc.) |  | |
| Locatie UM (*locatie* ***+*** *afd.* ***+*** *kamernr.)*  Location UM (*location* ***+*** *dept.* ***+*** *room no* ) |  | |
| Thuisadres (*adres* ***+*** *postc.* ***+*** *woonplaats*)  Home address *(address* ***+*** *postal code* ***+*** *city*) |  | |
| Telefoon werk/Telephone work |  | |
| GSM Mobiel nr / Mobile number |  | |
| FTE/Fulltime equivalent |  | |
| Geboortedatum/Date of birth |  | |
| Geboorteplaats/Place of birth |  | |
| Geboorteland/Country of birth |  | |
| Vooropleiding/Previous education |  | |
| Opleidingsplaats (*stad* ***+*** *land*)  Place of Education (*name city* ***+*** *country*) |  | |
| E-mail |  | |
| Datum in dienst/Date of Employment |  | |
| Datum uit dienst/End of Employment |  | |
| Promotor/Promotor |  | |
| Begeleider/Mentor-Supervisor |  | |
| AIO-NA-OIOTHO-OIO-Phd etc.  AIO-not AIO-OIOTHO-OIO-PhD etc.  Anders-benoem/Other-name |  | |

Blok facturering bestemd voor externe deelnemers/This part applicable for external participants

|  |  |
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| **FACTURERING** \*)invullen verplicht / **BILLING** \*) completion mandatory | |
| Kosten worden gedragen door Vakgroep Funding by Department |  |
| Budgetnummer Budget number |  |
| Naam budgethouder + locatie UM Responsible for budget (name) + location UM |  |
| Factuuradres (indien van toepassing) Billing address (if applicable) |  |

**INSCHRIJFFORMULIER STUREN AAN/PLEASE SEND APPLICATION FORM TO**  
[*aioonderwijs@maastrichtuniversity.nl*](mailto:aioonderwijs@maastrichtuniversity.nl)