

YANG YI YOUNG SCIENTIST FELLOWSHIP

APPLICATION FORM

At least one Letter of Recommendation is required. Each form must be signed by the referee him/herself; otherwise, the recommendation will be invalid.

For Secretariate use only

Application No. _____

Applicant's Name: Dr./Mr./Ms. _____

Nationality: _____

Date of Birth _____

Institute _____

Position or Program of Study:

Ph.D. *Ph.D. student*

E-mail: _____

Tel: _____

Postal Address:

Research Interests:

Education Background(Since College):

Working Experience if Available:

Research Experience:

YANG YI YOUNG SCIENTIST FELLOWSHIP

Publications:

Conference Presentations:

Academic Honors & Awards (Since College):

Other recognition:

Signature _____ Date _____

Please send the scanned copy of this Letter by email to Mrs.Malathi, Executive Officer, AFS at info@asianfisheriessociety.org