

Application Form "Tutor training for Astrolab"		
18 - 22 November 2018, University of Venda, South Africa		
Name:	First name:	
Birthdate (dd/mm/yyyy):	Gender:	Nationality:
E-mail address:		
Obtained university degree (level and discipline) and at which university:		
2. University where you teach		
Position:		
Institution/ University and Department		
Name and email of Dean of the Faculty or the Vice-Chancellor:		
Professional address (number, street, city, zip code, country):		
Professional e-mail address:	Professional web page:	
Number of undergraduated students in physics:		
Is there an astronomy course in the curriculum? Y / N		
If Yes: give a short description of the content: <ul style="list-style-type: none"> - How many hours per year for the astronomy course ? - How many students register this course? - Are they first year/second year/etc students ? - Which courses do you teach ? - Describe briefly (+/- 10 lines) what you will do after the training with the obtained competences in Astrolab: 		

This Form has to be sent to to thulani.jili@gmail.com, pcs200800@gmail.com, Sinah.Sekhula@univen.ac.za, before 04 October 2019.

Financial conditions : For the selected participants a grant will be allocated for the travel and the stay.

What I will do after obtaining Astrolab competences (max. 10 lines):
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Submit