**Mongolia & Inner Asia Studies Unit**

**The Chinggis Khaan Grant Programme**

APPLICATION FORM

|  |  |
| --- | --- |
| First name and surname Title (Dr, Mr, Mrs, Miss, Ms) |  |
| Nationality and Date of Birth |  |
| Home address |  |
| Institution and Address |  |
| Institutional E-mail  |  |

Please select which of the following grants are applicable:

¨ 9-Month Chinggis Khaan Grant at MIASU, Cambridge University

¨ 3-Month Chinggis Khaan Grant at MIASU, Cambridge University

¨ Either 9-Month or 3-Month Chinggis Khaan Grant at MIASU, Cambridge University

¨ 3-Month Chinggis Khaan Grant in Mongolia

¨ Please confirm, if shortlisted, that you will make yourself available on the interview date of Monday 30 June.

Signature Date