

1st SIOPE Student Summer School for Paediatric Oncology - Application Form



We are delighted to invite you to apply to participate in the 1st SIOP Europe Student Summer School for Paediatric Oncology – a new initiative designed to support young and promising medical students in developing their education and careers in paediatric oncology!

Online Application Procedure:

- · Applications to participate in the Course can only be submitted electronically.
- · Applicants must meet the minimum selection criteria outlined below:

Minimum Selection Criteria

Applicants must:

- · Be fluent in written and spoken English
- · Be a medical student at a university or school in Europe, with a minimum of 2-3 years schooling
- · Be dedicated to paediatric oncology
- · Be creative/out of the box thinking/talented

The application form provided must be used and includes the following sections:

- · Personal details and contact information
- · CV
- · 1 letter of recommendation
- Motivation letter
- · Poster (Guidelines available **here**)

Course application submission opens: 15 September 2023

Application submission closes: 15 December 2023

We encourage you to submit your application before the deadline to guarantee your place for this course. Applications received after the deadline will not be accepted.

Please ensure your application is complete prior to submission. A confirmation of submission will appear on your screen immediately upon submission.

Applicants will be notified of the status of their application in February 2024.

If you have queries or require further information, please send an email to: edu@siope.eu

This application form may require a longer time to complete. Please note that ongoing work is automatically saved in the online survey. If you are working on the same server and from the same device (i.e. same IP address), you can get back to this form and finish your answers later.

You can preview the application form here, but please note that only answers provided in this online survey will be valid.

All questions marked with an asterisk (*) are mandatory.

Please click "Next" to start the application.



1st SIOPE Student Summer School for Paediatric Oncology - Application Form

| * 1. Applicant Informa | tion | |
|---|-----------------------|-----------------------------------|
| Degree(s) held (MD, DO, PhD, etc.) | | |
| Last name | | |
| First name | | |
| * 2. Email | | 1 |
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| * 3. Date of birth (DD/ | MM/YYYY) | 1 |
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| * 4. Gender Male | | |
| Female | | |
| Other | | |
| * 5. Applicant Informa | tion | |
| Medical School/University | | |
| Address | | |
| Zip/Postal code | | |
| City | | |
| Country | | |
| Telephone | | |
| Mobile | | |
| * 6. Year you started n | nedical school (yyyy) | |
| * 7. Number of years of | of in medical school: | |
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| 8. Have you already reuniversity or school? | | s and adolescent medicine at your |
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| urse (max. 600 | ride a short motivat) words) | ion letter, maic | atilig wily you | wish to parti | icipate in tilis |
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| | and qualifications (starting with primary school). |
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| Name of institu | tion, course or degree, dates |
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| 14. Awards and | l Prizes if applicable. |
| | award, name of awarding entity, date |
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| | , meeting or conference, name of organising institute/entity, date, in ediatric/paediatric oncology |
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| | ournal, year, pages, link |
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| 16. Publication Authors, title, jo | |

| 17. Research if applicable. |
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| Project title, year(s), Institute, Department, Supervised by (if applicable), tasks |
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| 18. Grants if applicable |
| Funding institution, Title, Duration, Amount, Investigators |
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| * 19. Other relevant experience or interests |
| Details and time period |
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| 20. Any volunteer work in or outside of medicine if applicable. |
| Details and time period |
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| * 21. Is there any thing else you would like the organisers to know about you? | |
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| * 22. References (list at least 1): | |
| Name, Position, Institution, Department, Contact Information | |
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| 1st SIOPE Student Summer School for Paediatric Oncology - Applica | tion Fori |
| * 23. Career development plan (max 250 words) | |
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* 24. Upload your Poster (PDF, PNG or JPG)

Every applicant must upload a poster (PDF, PNG or JPG) to complete the application. Your task is to create a poster on future innovations in whichever discipline of medicine. Imagine yourself in a future position at your institution or hospital. You received tremendous funding for an innovative project in your institution, thus you must present this project in a poster. You have the freedom of choice and creativity: for example, you could focus on implementing artificial intelligence in clinical reasoning, health inequalities, scientific breakthroughs or innovative new architecture/infrastructure at your hospital, etc. Bear in mind that sometimes very simple projects might also be worthwhile to envision and pursue. All posters will be presented during a poster session at the Summer School, and the best poster will be awarded!

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* 25. Upload a letter of recommendation (PDF, PNG or JPG)

Choose File

Choose File

No file chosen