



ALMA MATER STUDIORUM  
UNIVERSITÀ DI BOLOGNA  
SCUOLA DI ECONOMIA, MANAGEMENT E STATISTICA

**Call for scholarships for research activities to support the Master Thesis  
(II Year HEM Students)**

**Deadline: 14th of February 2018 at midday**

The Master's Degree in Health Economics and Management (HEM) awards scholarships for research periods abroad. The aim of these scholarships is supporting graduating students who wish to spend a period abroad to write their master thesis (also connected to an internship). The call is reserved to students regularly enrolled in the II year of the Programme (the enrollment fee must be payed)

The amount of each scholarship will depend on the quality of the thesis project and on the location and length of their stay (which cannot be more than 6 months) .

Candidates must not be concurrently in receipt of another scholarship offered by the University of Bologna at the same time and for the same purpose.

The evaluation of projects will be made by a Selection Committee appointed by the Master's Degree Board, and the final ranking will be communicated by email.

**APPLICATION:** Students must provide the following documents:

- 1) Application Form
- 2) Detailed thesis project as agreed with your supervisor;
- 3) Acceptance letter signed by the hosting organization (if the student is granted a scholarship from the hosting institution it must be indicated in the letter);
- 4) Budget of your estimated expenses

Applications must be sent to [hem@unibo.it](mailto:hem@unibo.it) **within the 14th of February 2018 at midday.**

Persuant to art.13 of Legislative Decree 196/2003, personal data will be processed solely to allow participation in the call and in compliance with the legislation on protection of personal data.

**The winners will have to start the research abroad within 6 months from the ranking information.**

**Within 15 days from the end of the research students must submit a letter from the hosting institution, stating the actual fulfillment of the research period.**

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APPLICATION FORM

NAME.....  
ID NUMBER .....,  
THESIS TITLE.....  
LOCATION OF HOSTING INSTITUTION.....  
FROM ..... TO .....

PERSONAL DATA

- PLACE OF BIRTH .....
- DATE OF BIRTH .....
- RESIDENCE ADDRESS .....
- ZIP.....

(date)

(Signature)

ATTACHMENTS

- Detailed thesis project as agreed with your supervisor;
- Acceptance letter signed by the hosting organization
- Budget of your estimated expenses