



Saul Kagan Claims Conference Fellowship
for Advanced Shoah Studies

This application must be sent via email to Chavie.Brumer@claimscon.org

Last Name:	First Name:	Middle initial:
Current address:		
Street:		
City:	State/Province:	
Country:	Postal/Zip code:	
Telephone:	Fax:	
E-mail:		
Permanent address:		
Street:	Apt/Floor Number:	
City:	State/Province:	
Country:	Postal/Zip code:	
Telephone:	Fax:	
E-mail:		
Name of university where you are pursuing your PhD.:		
What degree are you pursuing?		
What year did you begin the program?		
What year do you expect to complete the program?		
Name of supervisor/advisor:		



Claims Conference ועידת התביעות
The Conference on Jewish Material Claims Against Germany

What languages do you know? Please be detailed in describing your ability to speak, read and understand these languages. Use as much of the space below as necessary.

What languages are you planning to study while in graduate school?

Name of College or University where you did your undergraduate work:

Year of Graduation:

Major:

Minor:

Concentration:

Final GPA:

If you have completed any graduate work prior to your current PhD. program, please provide the following for each institution attended:

Name of University:

Degree received:

Year of Graduation:

Area of study:

List all academic prizes or awards you have received:
