

# Human Rights Summer School (HRSS) 2019 Participant's Application Form



 $^{\ast}$  \*Application Fee: 500/- BDT only for domestic applicants to be paid by bKash (non-refundable) at 01705696897

1. PERSONAL DATA Applicant Name (In I		Lett	ers):								
Present Institution:							Year/Semester:				
Date of Birth:								Gender:			
Nationality:							Religion/Faith:				
Mailing Address:											
Permanent Address:											
Mobile No:	Mobile No:				Email:						
2. ACADEMIC BAG	CKGR	OUN	D (Attach Atte	sted cop	ies of Cer	tificates)					
Name of Degree	Boa	ırd/ I	nstitution	Group/Subject		Grade			Passing Year		
						GPA/CGPA	1	Out of			
SSC/ O Level or Equivalent											
HSC/ A Level or Equivalent											
LLB (Hons.)											
3 I ANCHACE PR	OFICI	FNC	V (Montion: Fl	uent Fo	ir or Mod	arata)	l				
3. LANGUAGE PROFICI English		Spea	aking:	Writing:		Readi		ng:			
Other(s)		Spea	aking:	Writing:		Read		Readii	ng:		
4. PREVIOUS TRA	INING	FXI	PERIENCE (IF	anv)							
		Organizing Institution		Medium of Instruction		Time/ Year		•	Special Achievement		
5. EXTRA-CURRIO	CULAF	R FE	ATS (If anv) [P	lease att	ach Evide	ence					
Human Rights Cam	paign		( <u></u> ;,,								
Social Service											
Volunteering											
Cultural Activities											

6. CONTRIBUTION TOWARDS DISADVANTAGED PEOPLE (If any)									
Have you ever worked for any disadvantaged people/ group? If yes, please explain how you think your work contributed towards advocacy for their rights, or made any impact.									
	•								
7. ENGAGEMENT/ ATT. Organization	ACHMENT WITH HUN Position	MAN RIGHTS ORGA Responsibil	ANIZATION (If an	f any) Time/Year					
Organization	rosition	Kesponsion	lities	Time/Tear					
8. HEALTH INFORMAT Please mention any med	ION (This is intended or	nly for your health ar	nd safety)						
Mental (if any)	icai nistory of Physical	or							
Please put tick if you have	any of the listed disease	es o Asthma	o Migraine	o Epilepsy					
Please list any medication	(s) vou take								
•	•								
Please mention any food/d	lrug allergies you have								
9. STATEMENT OF INT Why do you want to part	EREST (Please use extra icinate in the HRSS? Ex	a page) colain the relevance o	of HRSS spirit and	experience in vour					
future career plan [Maxin	num 300 words].	pram the relevance	or mass spirit and	experience in your					

# 10. PROBLEM SOLVING (Please use extra page) It is a busy day of the week. Your schedule requires you to divide your time between various school and probono human rights tasks: • Your Course teacher in Law 007 has given an assignment due in two days; • The HRSS authority requires you to attend the preparatory session for mooting competition at HRSS from 6 to 8 and then 9 to 11. You are part of the team as a researcher (you originally thought to use the post dinner time for exam preparation); • You are part of the Adhikarbhumi Team from HRSS to make a field visit and obtain essential data for a presentation on Persons with Disabilities in Dhaka. Your deadline is in one week; and • Your Law school is set to have Midterms on 6 papers from two days after HRSS is over. How will you prioritize your work? 11. REFEREE INFORMATION Name Name Institution Institution Address Address Phone No **Phone No**

**Email** 

Signature

Attestation

**Email** 

Signature

& Attestation

## 12. DECLARATION

I certify that the information submitted on my application form was complete and correct at the time of submission. Further, I understand that misrepresentation of any information or failure to provide necessary documents may result in my ineligibility for admission.

If selected I also hereby agree to pay the registration fee 10000.00 BDT only (domestic applicants) for / USD \$150.00 only (international applicants)\*\*

\*\*Please take note that, if selected the domestic applicants have to pay the registration fee by 15th September, 2019. The international applicants if selected can pay the registration fee at the HRSS Registration Desk on 9th October, 2019.

Signature: Date:

#### 13. bKash transaction ID (only for domestic applicants)\*\*:

# \*\* Please send 500/-BDT to 01705696897

## **Instruction for submission:**

Please send the completed application form along all necessary documents required for the application with color passport size photograph (not older than six months) in preferably in one single PDF file to the following email, mentioning your name and University in the subject line (e.g. Saira Rahman, University of Dhaka) and your bKash transaction ID in the email:

hrssapplication@gmail.com

For all queries please contact: elcop71@gmail.com, or tkbaul@gmail.com

For further information on ELCOP or HRSS please visit our website: <a href="http://www.elcop.org/">http://www.elcop.org/</a>