



SPHINGOLIPID CLUB

The first Association
of the Sphingolipidologists

application form

A NEW LOGO FOR THE SPHINGOLIPID

Directions: Complete the following application and send it electronically to elisabetta.albi@unipg reporting "**New SLC Logo**", as the e-mail object.

SUBMISSION DEADLINE: May 30, 2020 !

SECTION I: APPLICANT INFORMATION

Applicant Name Date of birth / /

Department

University

City Country Zip

Phone Mobile Ph E-mail

Membership on (date) / /

Applicant signature

Date

.....

.....



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SECTION II: SUPERVISOR STATEMENT

Supervisor (or Head of the Laboratory) name:

Position

I state that (*name of the applicant*) at the present date

(delete what is not of interest):

1 - is enrolled in the PhD Program

of the (*University/Research center*)

or

2 - is recipient of a postdoc position at the (laboratory, department)

of the (*University/Research center*)

Supervisor signature

Date

.....

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SECTION III: ATTACHMENTS

Please attach to the e-mail:

1 - Receipt of the Membership payment

2 - Logo design, according to the Call (see Logo Design Guidelines)