**EGE UNIVERSITY**

**GRADUATE SCHOOL of HEALTH SCIENCES**

**PORTFOLIO**

***Name and Surname***

*PhD Student*

***Supervisor’s Name and Surname***

*……Program*

*………Department*

**Year**

 **THESIS MONITORING COMMITTEE**

*EU Graduate School of Health Sciences*

 **Members of Thesis Monitoring Committee**

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| **Name and Surname, Title** |
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| **TMC Meeting No** | **Date** |
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 **SCIENTIFIC ACTIVITIES ATTENDED**

*EU Graduate School of Health Sciences*

 **Seminar/Course/Workshop/Conference/Symposium/Congress/Education visit/ Internship**

***(During PhD Training)***

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| **Date** | **Details**  |
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**PRESENTATIONS**

*EU Graduate School of Health Sciences*

**Poster and Oral Presentations**

***(During PhD Training)***

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| **Date and Place** | **Scientific Event** | **Authors/ Presentation Title**  | **Poster/Oral** |
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**PUBLICATIONS/PATENTS**

*EU Graduate School of Health Sciences*

**Research Article, Review, Book, Book Chapter, Patent**

***(During PhD Training)***

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| --- | --- |
| **Year** | **Details (authors, title etc.)** |
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**CV**

*EU Graduate School of Health Sciences*

**NAME and CONTACT DETAILS**

Name Surname:

Nationality:

Contact Address:

E-mail address:

**EDUCATION** (*reverse chronological order)*

20.. – 20.. PhD student in…….

20.. – 20.. BS in …..

**RESEARCH EXPERIENCE**

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**PROFESSIONAL EXPERIENCE**

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**TEACHING EXPERIENCE**

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#### FUNDING and ACADEMIC AWARDS (*bursaries, scholarships, travel grants*)

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**PUBLICATIONS**

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**PRESENTATIONS**

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**SKILLS (computer, lab, experimental techniques, statistical methods etc.)**

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**CERTIFICATES**

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**PROFESSIONAL AFFILIATIONS**

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**COMMUNITY SERVICE ACTIVITIES**

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