

TO BE COMPLETED BY THE APPLICANT

OFFICIAL NAME OF APPLICANT: _____

Please upload the completed form along with the other required supporting documents for your application.

PERSONAL STATEMENT

Please address all the following, in a maximum of 3,000 words. You may provide your responses in a separate document and attach it to this form.

- (a) Your current or **last held** position, role & responsibilities, highlighting aspects particularly relevant to public health. If you are currently not employed, please provide reasons.
- (b) The relevance of the DrPH programme to your work, your career goals, and how the programme would benefit you and your country.
- (c) Your goals after the completion of the DrPH programme and how it will help you achieve these goals.
- (d) The institution in which you intend to complete most of your DrPH portfolio, including the name, contact details, and affiliation of your proposed institutional mentor, and why these will be sufficient.

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