

Polish School of Medicine and Boloz-Kulesza Trust Fund Scholarships Report Template

A. Background Information

1. Name of Scholarship Awarded: (Please circle as appropriate)

Polish School of Medicine Memorial Fund / Boloz-Kulesza Trust Fund

2. Your Name:

3. Your contact e-mail address in Poland:

4. Polish Medical University/ Research Institute and Department in which you work:

5. University of Edinburgh Course attended & dates of the course:

B. Your aims and objectives:

1. What did you personally hope to achieve by coming on the course and if appropriate what did you think your university/department might benefit from your attendance?

2. To what extent were you able to meet your personal objectives?

3. How will you use the information you gained on the course?

3. Are there any other comments you wish to make?

Please return your report (preferably by e-mail) within 1 month of completing your course to:

Dr Maria Dlugolecka-Graham MBE
Polish School of Medicine Coordinator for The University of Edinburgh
MTO Office, 2nd floor
Chancellor's Building
49 Little France Crescent
Edinburgh EH16 4SB UK
e-mail: maria.graham@ed.ac.uk