

* The marked fields are mandatory.

Step 1 of 5

PERSONAL DATA

Form of address *

Please choose 

Title *

Please choose 

Last name *

First name *

E-mail *

< PREVIOUS STEP

NEXT STEP >

* The marked fields are mandatory.

Step 2 of 5

I would like to apply for the Falling Walls Lab in *

Cape Town (Deadline: 17 April 2019) 

PLEASE SELECT YOUR LAST DEGREE UNLESS YOU ARE CURRENTLY ENROLLED AS A BACHELOR STUDENT OR A POSTDOC. *

I am currently enrolled as a student.

I am currently a Postdoc.

I have already completed my degree.

< PREVIOUS STEP

NEXT STEP >

HIGHER EDUCATION

Please list your current subject of study or your most recent degree.

University/College *

Name of studies *

Category of study *

Please choose a study 

Degree (i.e. Bachelor, Master, PhD) *

Please choose 

currently enrolled

degree completed

In order to make all grades comparable, please also indicate your grade on a general scale from "excellent" to "very poor". *

Please choose 

MAJOR PUBLICATIONS

Year

Title

+ ADD ANOTHER PUBLICATION

AWARDS AND SCHOLARSHIPS

Institution/Name

Year

Please keep an abstract of your idea (max. 200 characters), statement of motivation (max. 400 characters) and CV ready for the application process. Please note that some of the information will be used for event material.

The application must be filled out in English.

If you have any questions, please do not hesitate to send us an e-mail to lab@falling-walls.com or visit our [FAQ section](#).

* The marked fields are mandatory.

Step 3 of 5

PERSONAL DATA

Nationality *

 

Please enter the organisation/institution/company you are currently associated with *

Institution City *

Institution Country *

PLEASE INDICATE YOUR CURRENT PLACE OF RESIDENCE

City *

Country

 

Telephone *

* The marked fields are mandatory.

Step 4 of 5

The title of my presentation: *

Breaking the wall of

Example: Breaking the wall of... Poverty

Project Field *

Example: Artificial Intelligence, Sustainability, Engineering

Please outline your idea. If the project is a group effort, please highlight your personal contribution.

Address the problem. *

You have 200 characters left.

Offer your solution. *

You have 200 characters left.

* The marked fields are mandatory.

Step 5 of 5

HELP US IMPROVE. HOW DID YOU HEAR ABOUT THE FALLING WALLS LAB?

- | | |
|--|--|
| <input type="radio"/> Newspaper | <input type="radio"/> Newsletter |
| <input type="radio"/> Poster/Flyer | <input type="radio"/> Friends/Colleagues |
| <input type="radio"/> Your institution | <input type="radio"/> Facebook |
| <input type="radio"/> Twitter | <input type="radio"/> LinkedIn |
| <input type="radio"/> Other | |

PLEASE UPLOAD YOUR CV (DON'T INCLUDE ANY LETTERS OF RECOMMENDATION OR ADDITIONAL CERTIFICATES)

*

Upload your CV here

(PDF, max. size 3 MB)

- I agree that only my full name and email address will be archived for communication purposes after 31 December 2019. If I do not agree to these terms, I will contact the Falling Walls Foundation at lab@falling-walls.com *
- I hereby certify that I am of legal age (18 years or older). *
- I agree to the Falling Walls Terms and Conditions. *