



CAS-ANSO Scholarship
(Degree Program)
-2025-

Recommendation Form
for ANSO members only

ANSO Member organization: _____

Telephone: _____

E-Mail: _____

1. Please fill in the basic information of the applicant

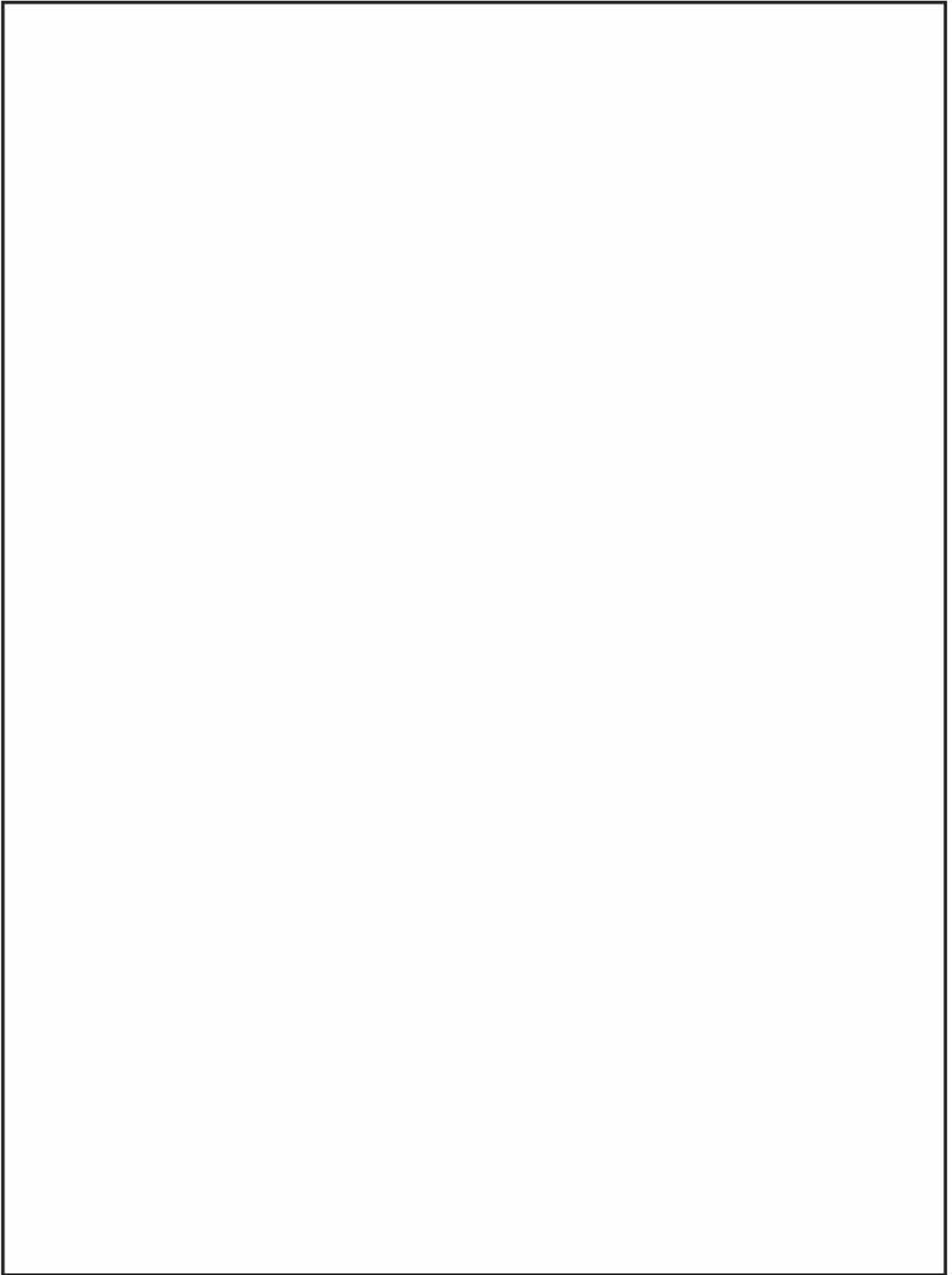
(ALL BLANKS MUST BE FILLED):

Name (in English)	
Passport Number	
Gender	Male Female
Date of Birth	Date Month Year
Nationality	
Type of Program	Master program PhD program
Preferred University	University of Science and Technology of China (USTC) University of Chinese Academy of Science (UCAS)
Preferred School/Institute	
Graduate from (or will graduate from)	
Degree (or will get)	

Research Area	
Publications (if applicable)	
Awards and Honors (if applicable)	
E-mail and Tel	

2. Why is this applicant a competitive candidate for the CAS-ANSO Scholarship?

Why do you (as an ANSO member organization) recommend him/her?(no more than 500 words)



Signature of ANSO Member's legal representative	Date Month Year
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Please send the signed form(s) back to the ANSO Secretariat at
zhongxiu.wang@anso.org.cn (Ms. Zhongxiu WANG) before 14th
February 2025.