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Submit to the Secretariat of the Faculty

APPLICATION FOR THE EXTENSION OF THE FINAL EXAM FOR THE CONFERRAL OF THE „DOTTORATO DI RICERCA“

TO THE PhD PROGRAMME COMMITTEE

The undersigned (surname and name) _____
 student no. _____ born in _____ on _____
 enrolled in the academic year _____ of the final year of the PhD Programme in _____
 _____ cycle _____

(please verify your address and telephone number on
<https://aws.unibz.it/students-zone/login.aspx?ReturnUrl=%2fstudents-zone%2fdefault.aspx>)

requests

the extension to the following academic year for the final exam for the conferral of the title “dottore di ricerca”.

Reason:

_____, (date) _____

 Signature

 Name of supervisor

 Signature of supervisor

For approval:

 Signature of the coordinator