



UNIVERSITÀ DEGLI STUDI DI TORINO

Direzione Ricerca e Relazioni Internazionali

Servizio Ricerca e Formazione Avanzata

I, THE UNDERSIGNED (Name and Surname)

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PhD PROGRAMME IN

CYCLE

(Co-tutoring PhD Programme - Cotutelle with)

(cycles 22/23/24/25 only, SPECIALIZATION IN)

MATRICOLA/ STUDENT NUMBER

APPLIES FOR (one certificate per language)

- A **PHD ENROLLMENT/ATTENDANCE** CERTIFICATE IN Italian/French/English (circle the chosen language)
- A **PHD ENROLLMENT/ATTENDANCE AND AWARD OF SCHOLARSHIP** CERTIFICATE IN Italian/French/English (circle the chosen language)
- AN **AWARD OF PhD DEGREE** CERTIFICATE ON UNSTAMPED PAPER IN Italian/French/English (circle the chosen language). THE FINAL ORAL EXAMINATION TOOK PLACE ON (date)_____
- Please send the certificate(s) by post to the following address (for students resident outside the province of Turin only)_____

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