

REQUEST FOR PHD FINAL EXAMINATION

Trieste,

To the Director of SISSA
protocollo@sisa.it

The undersigned,
born in, on enrolled in the
..... year of the Ph.D course in,
for the academic year, asks to take the final examination to obtain the
research degree of "Doctor Philosophiæ".

I declare that the title of my thesis is:
.....

My supervisor(s) is/are (name and institution):
.....

My external referees are (name, institution, e-mail):
.....

My final examination is expected to take place on the day:

Hereby, I also commit myself to upload the final version of my Ph.D thesis to SISSA "Digital Library-IRIS" and I authorize the School to distribute it through Internet and Interlibrary Loan (ILL) according to current legislation.

Yours faithfully,

.....
(signature)

In accordance with Italian D.Lgs 196/03 and the General Data Protection Regulation (EU) 2016/679, I hereby give permission to use my personal data for all matters connected to the procedure and for statistical purposes in full protection of my rights and confidentiality (see <https://www.sissa.it/privacy>).