

ATTACHMENT 1)

To the PhD Course Coordinator in

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PEC.....

dottorato@uniba.it

Application for participation in the oral test to be carried out electronically

I, the undersigned, (surname _____ (name) _____)

Valid identity card or passport: no. _____

Ask for taking the oral exam electronically to be admitted to the doctorate in

For the following purpose:

For this purpose, I declare that the electrical connection will take place at the following location:

Address:

N.

Postal code:

City:

Nation:

Telephone

E-mail:

Skype or other valid address:

declare, furthermore, to be aware that the electronical connection will be done on the date and time indicated.

Date,

Candidate's signature
