



UNIVERSITÀ DEGLI STUDI DI MILANO

RESUMING PHD STUDIES REQUEST

To the Head of the Students Registrar of the University of Milan

I, the undersigned:

Matriculation no.....

Surname.....Name.....

Enrolled in the year of the PhD programme

in.....

Cycle

Suspended from the PhD programme from to

REQUIRE TO RETURN TO STUDIES

from (DD/MM/YYYY)

Place

Date/...../.....

Signature

PhD Coordinator signature

.....