

Application for admission of external courses

PhD / Doctor of Philosophy (Q 794 440 202)

Please complete this form **exclusively computer based** and tick where appropriate!

Applicant

Academic degree, surname:

.....

First name:

.....

Registration number:

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Address:

.....

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Phone number:

.....

E-Mail:

.....

Department of International
Relations - PhD School

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PhD-Studien@i-med.ac.at
www.i-med.ac.at



MEDIZINISCHE
UNIVERSITÄT
INNSBRUCK

I want to apply for admission of the attached certificates of courses

1st course

Title of course:

Lecturer / Institution:

as core subjects

seminars/lectures

research training seminars

general subjects

semester hours requested:

accepted:

2nd course

Title of course:

Lecturer / Institution:

as core subjects

seminars/lectures

research training seminars

general subjects

semester hours requested:

accepted:

3rd course

Title of course:

Lecturer / Institution:

as core subjects

seminars/lectures

research training seminars

general subjects

semester hours requested:

accepted:

4th course

Title of course:

Lecturer / Institution:

- as
- core subjects
 - seminars/lectures
 - research training seminars
 - general subjects

semester hours requested:

accepted:

.....
Date

.....
Student's signature

Agreement of PhD programme coordinator

accepted YES NO

.....
Date

.....
Signature of PhD programme coordinator (name:)

Agreement of Vice Rector for Teaching and Study Matters

accepted YES NO

.....
Date

.....
Vice Rector for Teaching and Study Matters
Univ.-Prof. Dr. Peter Loidl

Please submit the application together with the certificates of courses in original and copy