### ***THIS FORM HAS BEEN DRAFTED FOR THE SOLE PURPOSES OF UNDERSTANDING OF NON-ITALIAN SPEAKING STUDENTS***

### ***THE OFFICIAL FORM TO BE USED SHALL BE THE ONE IN ITALIAN LANGUAGE***

**PhD PROGRAMMES – INTERNATIONAL MOBILITY**

**FORM TO BE USED BY PhD STUDENTS NOT BENEFITTING A PhD SCHOLARSHIP**

**BEFORE DEPARTING**

**This form must be sent/ handed over to the U.O.C. Dottorati**

**The PhD student must fill it in and sign it, and it shall be signed by the PhD Coordinator on behalf of the PhD Board of Professors**

I the Undersigned Mr/Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ enrolled at the (*report the year of enrolment*) \_\_\_\_ of the PhD Programme in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

A.Y. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ cycle \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ - e-mail\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REQUESTS**

To carry out a period of international mobility at the Institute / Laboratory \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For the period from (dd/month/year) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to (dd/month/year)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AND COMMITS HIMSELF / HERSELF TO**

Send or hand over the statement of presence abroad, issued by the host Institution / Laboratory, to the U.O.C. Dottorati monthly or within 15 days from completing the international mobility period. The statement must be on the headed paper of the host Institution / Laboratory and duly signed by a proper representative

Date, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ The PhD Student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Università degli Studi di Brescia**

**PhD Programme in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**AUTHORIZATION OF THE PhD BOARD OF PROFESSORS**

**(****Pursuant to Art. 5 para. 6 letter f) and Art. 10 para. 6 of UniBS PhD Regulations)**

The PhD Board of Professors, in the meeting of (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, authorized the PhD student to carry out the international mobility period required.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(date) The PhD Coordinator

(hand or electronic signature – no scanned signature)

\* Minimum consecutive period of international mobility necessary to receive the increase as reimbursement of expenses, duly certified (invoices, etc.): 15 days