**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**

Attn. To the Chancellor

University of Brescia

To the PhD Office

To the PhD Course Coordinator

**Request to suspend the PhD Course for serious and justified family reasons According to Art. 13 “*Suspension, interruption, loss of status and renouncement*”, paragraphs 2D and 3 of UNIBS Rules and Regulations, issued by Chancellor’s Decree no. 3796 of 12.02.2016**

# (STATEMENT IN LIEU OF A NOTARIAL ACT AND CERTIFICATE)

# (articles 46-47 of Italian Presidential Decree no. 445 of 28.12.00 and amendments thereof)

The undersigned(*surname and name*)…………………………………………………………..born in…...........................…………..on……………………..………citizenship……………………………

enrolled in the………………academic year – Cycle …………. of the PhD in:

….………………………..…………………………………………………………………………….

with administrative offices at this University,

* Benefitting of a PhD scholarship
* Not benefitting of a PhD scholarship

# TO THAT END DECLARES

to be placed on leave for serious family reasons from the date………………. until (exact date)………………………… (comprehensive of no. …………months) and, if beneficiary of a PhD scholarship to suspend the benefit of that said scholarship from the same date of ……………………………………..

Attachments:

* Copy of a valid ID document / passport;
* Letter of motivation.

Place/Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Full name and Signature of the declarant

**Notice**: the student retains the rights to any scholarship to be suspended during the suspension period and to be resumed when the student returns.