**APPLICATION TO WAIVE THE BENEFIT OF INTERNATIONAL MOBILITY SURCHARGES**

I, THE UNDERSIGNED\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ENROLLED AT THE PhD PROGRAMME IN\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Declare to voluntarily waive the benefit of the scholarship increase (highlight the appropriate box):**

 **For the quota of 50% of the yearly gross scholarship**

 **For the quota of 10% of the yearly gross scholarship**

 **To both increases (to the 50% and to the 10% of the yearly gross scholarship)**

**I hereby attach the request to be authorized to carry out the period of international mobility**

In Witness Thereof

Date, \_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Signature either hand-written or *electronically signed* *ex Art. 24 D.Lgs. 82/05*)