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.....

(full name)

INFORMATION ON UNDERTAKEN DOCTORAL STUDIES

I hereby declare that:

- I have never undertaken doctoral studies before,
 I have been a doctoral student before, during the terms listed below:

No.	University, field	Start date of PhD studies (month, year)	Study period (number of academic terms*)
1.			
2.			
3.			

* Number of academic terms indicate the number of terms in which the PhD student status was held.

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(date)

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(signature)