



UNIVERSITATEA DE MEDICINĂ ȘI FARMACIE „CAROL DAVILA“ DIN BUCUREȘTI



Str. Dionisie Lupu 37, sector 2, București, 020021, România, www.umfed.ro, email: rectorat@umfed.ro

Agree,

PhD Supervisor

(Signature/and stamp)

Form I

MISTER RECTOR,

The undersigned* _____ born on: day____ month_____ year _____, in Locality/City _____, District _____ would kindly like to ask you to accept my enrolment to the admission contest for University Doctoral Studies, for the July 2023 session, in Medicine/Dental Medicine Medicine/Pharmacy domain (tick where appropriate), specialty (of the PhD supervisor): _____, PhD Supervisor _____.

Upon enrolment I presented the following documents:

- File cover (standard form)
- Request for enrolment* (form I) signed by the candidate and the PhD Supervisor
- Personal chart (form II)
- Graduation certificate of the training year for the Romanian language or the Linguistic Competence Certificate, released by the Discipline of Modern Languages in U.M.F. "Carol Davila"
- Curriculum vitae - **signed**
- List of elaborated and published scientific papers- signed (where applicable)
- Information and consent note (form VII)

Date _____

Signature

** Both the enrolment request as well as the personal chart must be completed in all points, in capital letters*

To Mister Rector of University for Medicine and Pharmacy "Carol Davila" in Bucharest

*** To be filled in with capital letters, size 24, Calibri. In the case of married contestants, the form will be completed as follows: the name prior to marriage followed by the name acquired through marriage, the initial of the father's name and the candidate's first name (E.g. POPESCU CAS. IONESCU. T. MARIA). The doctoral domain will be completed: (E.g. MEDICINE/DENTAL MEDICINE/PHARMACY).**