**FILE COVER**

**NAME AND SURNAME \*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**DOMAIN OF UNIVERSITY DOCTORAL STUDIES:**

**❑MEDICINE ❑DENTAL MEDICINE ❑PHARMACY**

**PhD SUPERVISOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-MAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\* 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).**