Ph.D. Suspension Form

Extension

***To the Rector of the University of Ferrara***

I the undersigned

Born in on

Enrolled as a student at the Ph.D. Course in

Course year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID n.

Currently benefitting of a period of suspension started on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ until \_\_\_\_\_\_\_\_\_\_

for the following reason:

* Maternity leave (include medical proof)
* Serious Illness (include medical proof)
* Trial period necessary for a job hiring.
* Other particular and justified personal reasons properly examined and valued from the Board of Professors

**REQUEST**

To continue the suspension of the activity of the Ph.D. Course until \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

In case of serious illness another medical proof must be attached.

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

(date)

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

(signature)