

UNIVERSITÀ DEGLI STUDI GUGLIELMO MARCONI

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To the Head
of the Doctoral Research Office
Università degli Studi "Guglielmo Marconi"

The undersigned _____ born in _____
on _____ enrolled in year _____ of the Doctoral Programme in _____
_____ Cycle _____ as a Scholarship Holder

- PNRR
 University

H E R E B Y R E Q U E S T S

to undertake a research period abroad

► **at the following host institution/university:**

registered address _____ street _____
_____ principal operational address _____ street _____

Contact person at the host institution:

► **start and end dates of the period abroad:**

► **consistency of the activities planned during the research period abroad with the research project:**

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Doctoral Researcher's Signature

Reviewed and approved for submission to the Coordinator
Supervisor's Signature

Reviewed and approved for forwarding to the Administration
Coordinator's Signature
