

Faculty of Humanities | Dean’s office

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Registration for PhD oral exam

|  |  |
| --- | --- |
| Last name: | First name: |
| Street, no.: | Zip code, town: |
| Phone number: | Home town/canton: |
| Enrollment number: | Field of study: |
| Institute: | First examiner: |
| Second examiner: | E-mail second examiner: |
| Dissertation title: | |

Attachments:

* Dissertation declaration
* Short CV
* Examination fee payment confirmation
* Enrollment confirmation (previous semester)
* Phd thesis (PDF)

We hereby confirm that all requirements from the promotion agreement are met.

Bern, January 24, 2024

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Signature PhD candidate

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Signature first examiner