Form 4. ***“Doctor Europaeus”* mention application**

**This form is to be delivered to phdcourse.vas@unimi.it**

**duly completed and signed by the Ph.D. student and the PhD coordinator.**

*To obtain the "Doctor Europaeus" mention, the Ph.D. student must apply using the Form 4 – Doctor Europaeus application, fulfilling the following requirements (on the top of the ordinary proceedures for the submission, deposit request, and defense of the doctoral thesis):*

*- The two reviewers who evaluate the thesis must be from two different EU countries and at least one of the two must be a University professor (different from the one where the thesis will be defended).*

*- At least one of the two members of the Thesis Committee, who must belong to a University, has to belong to a higher education institution from a different European country (different from the one where the thesis will be defended).*

*- The thesis must be written and discussed in the English language.*

*- The Ph.D. student went for secondment to another European country for at least three months, within a stay of at least three months. European countries mentioned above are referred to as any of the European countries, not only the ones belonging to the European Union (e.g., Switzerland and the UK are included).*

**Last and First name of the Ph.D. Student** Click or tap here to enter text.

**Registration ID** Click or tap here to enter text.

**Ph.D. course** Click or tap here to enter text.

**Main Supervisor** Click or tap here to enter text.

**Title of the thesis**

Click or tap here to enter text.

**Secondment abroad[[1]](#footnote-1):**

Click or tap here to enter text.

**Secondment placements[[2]](#footnote-2):**

Click or tap here to enter text.

**External Reviewers appointed by the Ph.D. Council[[3]](#footnote-3):**

External reviewer 1 Click or tap here to enter text.

External reviewer 2 Click or tap here to enter text.

**Thesis Committee member:**

Click or tap here to enter text.

**Date** Click or tap to enter a date.

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

Ph.D. student sign

**Authorization from the Ph.D. Council – Date** Click or tap to enter a date.

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

Coordinator

1. Number of months [↑](#footnote-ref-1)
2. Where and when [↑](#footnote-ref-2)
3. Name, Title, Institution, email address [↑](#footnote-ref-3)