Citizen from Austria and EU- citizen must submit their complete documents until 16.04 in the

Eingangsstempel								Registration number							•	
complete	docu	ment	s until	05.0	)2 ir	า the รเ	ımmer	term	and	05.09	in the	winter	term	١.		
summer	term	and	16.11	in t	the	winter	term.	Non-	EU	and	EWR	citizen	hav	e to	submit	their
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## **Application for admission** to PhD programme

PhD / Doctor of Philosophy (Q 794 440 202)

Students must submit the application in person at the Department of International Relations - PhD School, Fritz-Pregl-Straße 3, IV, A-6020 Innsbruck

Degree programme: Q794440202 - PhD

Please complete this form on a computer and tick where appropriate!

## **Annlicant**

Арричант				
Academic degree, First name, Surname		Sex:	male	female
Date of birth: Citizenship:		Native lange	uage:	
Postal address:				
Phone number:	E-Mail:			
I have already been admitted at an Austrian university.  NO YES, my registration num	ber:			
I have already submitted an application for a		ruck Medical	University:	
Intended PhD programme				
MCBD - Molecular and Cellular Biology of	Image-g	uided Diagno	osis and The	erapy
Diseases	Musculo	skeletal Scie	ences	
Infection, Immunity & Transplantation / HOROS	Neurosc	ience		
Doctoral College				

## Point 1: Former studies have been completed in Austria Completed studies:

(Provide a detailed description of the studies and give information about the duration of the studies in semesters)

I have	completed the doctor	al study of medi	cine (201) at anothe	r Austrian Unive	ersity
I have	completed the diplom	a study human	medicine (202) or de	entistry (203) at	an Austrian University
I have	completed one of the	following maste	r/ diploma studies at	an Austrian Un	iversity:
	Biology		Biotechnology		Botany
	Chemistry		Microbiology		Molecular Biology
	Molecular Medicine	<b>:</b>	Pharmacy		Zoology
	others:				
	rmer studies ha			n semesters) Un	niversity, Faculty, Country,
Academic deg			Ü	,	, , , , , , , , , , , , , , , , , , ,
Has an experi	mental diploma thesis	s/master's thesis	been completed?		
NO	YES (	Attach abstract!	)		
Title:					
Other compar	able experimental sci	entific experienc	es: (attach certificate	e)	
Have you alre	ady been admitted to	PhD / Doctor of	Philosophy program	nme?	
NO	YES				
·	culty, Country, date o				

Intended start of study		
winter term: October summer term: Ma	arch	
o you intend to take up medical specialist training during your PhD stud	dies? YES NO	
Herewith I confirm that the information provided above is true and correct. I all for immediate admission to or continuation of the study programme I intend to I am aware that my admission will be withdrawn, if I have been admitted on the submission of forged documents will be prosecuted.  If Medical University of Innsbruck needs to request personal data from other a application, I give my consent, that the relevant authorities may disclose personal university.	o commence in Austria.  The basis of false statements and that the authorities in order to process my	
Date Student's signar	ture	
Attachments		
I submit the application together with the following documents:		
Study agreement form		
University diploma		
Record of academic progress (transcript of university courses and exa	ams)	
Curriculum vitae	u113)	
Abstract		
other:		
Approved by the Vice Rector of Teaching of the Medical University of In		

MEDICAL UNIVERSITY OF INNSBRUCK - International Relations - PhD School

Innsbruck, Date

Fritz-Pregl-Straße 3, IV, A-6020 Innsbruck

E-mail: PhD-Studien@i-med.ac.at - Internet: http://www.i-med.ac.at

Signature of the Vice Rector of Teaching and Study Matters