Academia Copernicana Interdisciplinary Doctoral School
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 (full name)

INFORMATION ON UNDERTAKEN DOCTORAL STUDIES

I hereby declare that:

❑ I have never undertaken doctoral studies before,

❑ I have been a doctoral student before, during the terms listed below:

|  |  |  |  |
| --- | --- | --- | --- |
| **No.**  | **University, field** | **Start date of PhD studies**(month, year) | **Study period**(number of academic terms\*) |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |

\* Number of academic terms indicate the number of terms in which the PhD student status was held.

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 (date) (signature)