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## WITHDRAWAL FROM PHD COURSE

TO THE RECTOR OF THE UNIVERSITY OF GENOA

I ..... (student n. ....) born in  
..... (State.....) on ..... enrolled in the ..... year of the PhD  
course in.....  
curriculum.....  
cycle ....., grant holder YES ☐ NO ☐

hereby declare to WITHDRAW from the abovementioned PhD course for the following reason:

.....  
From (date) .....

I am aware that (only for grant holders):

- I am entitled to receive the proportional amount of scholarship if the Teaching Board certifies that I have regularly and fruitfully carried on research activity until the day of withdrawal.

In addition, I am aware of the **irrevocability** of the withdrawal and of the **impossibility** of resuming the academic career started in this University – except for academic qualifications already awarded– which **shall have no effect** whatsoever (as per the State Council's opinion expressed during the General Meeting held on 26.5.1966, n. 1655).

**The withdrawal will lead to the extinction of the University Career already covered and to the annulment of any exam taken.**

.....  
(date)

.....  
(signature)