

**APPLICATION FOR DOCTOR’S DEGREE**

Mr/Ms Date of birth: Place of birth: Province: Country: Nationality: Address:

 City/Town: Province: Country: e-mail: Telephone:

**DECLARES**:

that, having completed the studies specified by current legislation to obtain the degree of DOCTOR, and having paid the corresponding fees Standard

General category large family Special category large family

**REQUESTS** the issuance of the corresponding degree, considering that if the programme and department where the thesis was defended are different to those where the doctoral courses were taken, the following doctoral programme shall be included:

 .

Salamanca, on 20

Signed:

FORMALITIES

According to the Order of 12 April 1971 (Official State Gazette of 22) the interested party presents his/her National ID no. Passport no.

Foreign ID no. , proving that he/she was born in province of on 19 .

Salamanca, on 20

*THE OFFICIAL*

**THE RECTOR OF THE UNIVERSITY OF SALAMANCA**