



**UMG**  
dubium sapientiae initium



**MOBILITA' DOTTORANDI DI RICERCA – FONDO GIOVANI L. 170/2003**

**ATTESTAZIONE DI INIZIO MOBILITA' PRESSO  
UNIVERSITA' STRANIERA/ENTE DI RICERCA STRANIERO  
OSPITANTE**

**DECLARATION OF ARRIVAL AT THE HOST UNIVERSITY/INSTITUTION**

To send as soon as possible (by fax) at:

**AREA AFFARI GENERALI**  
Edificio direzionale  
Viale Europa, località Germaneto  
88100 Catanzaro – ITALY  
Fax: +39.0961.369.6150  
e-mail: socrates@unicz.it

Da inviare al più presto (via fax) a:

**AREA AFFARI GENERALI**  
Edificio direzionale  
Viale Europa, località Germaneto  
88100 Catanzaro – ITALY  
Fax: +39.0961.369.6150  
e-mail: socrates@unicz.it

Academic year:

PhD Student in:

This is to certify that the PhD student \_\_\_\_\_,  
born on (dd/mm/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_ in (city – country) \_\_\_\_\_,  
coming from **UNIVERSITÀ DEGLI STUDI MAGNA GRÆCIA DI CATANZARO** in the frame of "Bando Mobilità  
Dottorandi di Ricerca – Fondo Giovani L. 170/2003", has started his/her mobility at (name of host  
University/Institution) \_\_\_\_\_ in  
(city – country) \_\_\_\_\_, on (dd/mm/yy) \_\_\_\_/\_\_\_\_/\_\_\_\_

The above PhD student is expected to spend a period of \_\_\_\_\_ months.

Position:

Name:

Signature:

Date:

*Stamp of the receiving Institution*



**MOBILITA' DOTTORANDI DI RICERCA – FONDO GIOVANI L. 170/2003**

**ATTESTAZIONE FINALE DEL PERIODO DI MOBILITA' PRESSO  
UNIVERSITA' STRANIERA/ENTE DI RICERCA STRANIERO  
OSPITANTE**

**CERTIFICATE OF ATTENDANCE**

Academic year:

PhD Student in:

This is to certify that the PhD student \_\_\_\_\_,  
born on (dd/mm/yy) \_\_\_\_ / \_\_\_\_ / \_\_\_\_ in (city – country) \_\_\_\_\_,  
from the **UNIVERSITÀ DEGLI STUDI MAGNA GRÆCIA DI CATANZARO**, has completed a period of  
mobility within “Bando Mobilità Dottorandi di Ricerca – Fondo Giovani L 170/2003” (name of host  
University/Institution) \_\_\_\_\_ in  
(city – country) \_\_\_\_\_, from  
(dd/mm/yy) \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to (dd/mm/yy) \_\_\_\_ / \_\_\_\_ / \_\_\_\_.

Position:

Name:

Signature:

Date:

*stamp of the receiving Institution*