FORM FOR COMPLETED OBLIGATIONS OF DOCTORAL STUDY OF BIOSCIENCES FOR ENROLMENT IN 4th YEAR

Name and surname of student:

_____

Enrolment number: _____

Academic year of enrolment in second year: 20___ / 20___

Scientific field: _____

Supervisor: _____

IN THE 3rd YEAR, THE STUDENT COMPLETED AN INDIVIDUAL RESEARCH WORK OF 60 ECTS.

Progress of research work (explanation by the mentor, 1 - 2 sentences):

_____

_____

_____

_____

_____

Education abroad (outside Slovenia):

Type of education (research work, course abroad, participation in a conference, summer school...):

_____

_____

When and where?

_____

_____

Supervisor (*signature*): Student (*signature*):

_____ _____

Office of Level 3 Studies: Date: _____

Students must submit the form to the BF 3rd Cycle Studies Office, Jamnikarjeva 101, Ljubljana: doktorski@bf.uni-lj.si before enrolling in the 4th year of the Biosciences program.