



**Registration application of a doctoral subject, a study plan, a thesis plan, supervisors
and a follow-up committee for doctoral training**

The right to study has started: ____/____ (mm/year)

in doctoral subject: _____

Doctoral programme:

Doctoral Programme in Immunology (ImmuDocs)

Doctoral Programme in Nursing Science (DPNurs)

Drug Research Doctoral Programme (DRDP)

Finnish Doctoral Program in Oral Sciences FINDOS-Turku

Turku Doctoral Programme of Molecular Medicine (TuDMM)

Turku Doctoral Programme in Clinical Research (DPCR/TKT)

Doctoral programme on Inequalities, Interventions and
New Welfare State (DPInvest)

Full name of the doctoral candidate: _____

Social security number or date of birth: _____

Telephone: _____

E-mail: _____

RECOMMENDATION OF THE DOCTORAL PROGRAMME

- Application recommended
 Application not recommended (reasons enclosed herewith)

Date ____ / ____ 20____

Signature and name in block letters

DECISION OF APPROVAL

The registration is approved

Turku ____ / ____ 20____

Dean/Vice dean _____

Chief academic officer _____