Admission to the Doctoral Program of Medical Science

UO 790 202 at the Medical University of Graz

Registration for personal interview

Applicant information

|  |
| --- |
| Surname |
|  |
| First name (s) |
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| **Dissertation** topic (as published in MUGthesis) |
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| **ID number** MUGthesis |
|  |
| Name of the **Institute/ Division (Lehrstuhl)/ Clinical Division** where the dissertation will be completed |
|  |
|  |
| Name of the **Doctoral School** |
| [ ]  Lifestyle-Related Diseases | [ ]  Neuroscience |
| [ ]  Molecular Medicine and Inflammation | [ ]  Sustainable Health Research |
| [ ]  Musculoskeletal System & Oral Health | [ ]  Translational Molecular and Cellular Biosciences |
|  |  |
| **Study status** |
| [ ]  First admission | [ ]  Readmission |

In case of readmission and change of the dissertation topic, please fill in the following information:

|  |
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| **Title of old dissertation** topic (as published in MUGthesis) |
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| **ID number** MUGthesis |
|  |
| Name of the **Institute/ Division (Lehrstuhl)/ Clinical Division** where the dissertation will be completed |
|  |
|  |
| Name of the **Doctoral School** |
| [ ]  Lifestyle-Related Diseases | [ ]  Molecular Medicine and Inflammation |
| [ ]  Neuroscience | [ ]  Dentistry and Maxillofacial Surgery |
| [ ]  Translational Molecular and Cellular Biosciences | [ ]  Bones, Muscles and Joints |
| [ ]  Sustainable Health Research | [ ]  General and Clinical Pathophysiology |

I hereby apply for participation in a personal interview about the above indicated dissertation topic.

|  |  |  |
| --- | --- | --- |
| Date |  | Signature of applicant |

Supplements:

Copy of relevant Bachelor/ Diploma/ Master degree certificates and transcripts

*Please note: Any legalization of documents necessary needs to be provided prior to admission in case of receiving a university place!*