



UNIVERSITY OF PISA

DEPARTMENT OF BIOLOGY
Master's degrees in Biological Sciences (Class LM-6)

To be sent to:
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Dept. of Biology – Didactic Office - Tel. 050 2211517
Via A.Volta, 4 bis - 56126 PISA

APPLICATION FOR APPOINTMENT OF EXAMINERS (“correlatori”)
(Graduation Date)

Name of Candidate _____ Student Identification Number _____

Tel. _____ Mobile phone _____ e-mail _____

Master degrees in _____
Curriculum _____

Title of Thesis: _____

Professor of the Master Degree (Tutor/“Relatore”): _____

Tel. _____ e-mail _____

Supervisor (Second Tutor): _____

Tel. _____ e-mail _____

Host Institution Tutor (Second Tutor): _____

Tel. _____ e-mail _____

Signature of the graduating student

Date _____

REQUIRED APPENDICES: Master's thesis abstract (the Abstract should not exceed one page).