



DIPARTIMENTO di BIOLOGIA



UNIVERSITÀ  
DI PISA

---

APPLICATION FORM FOR THE APPOINTMENT OF CO-SUPERVISORS

I, the undersigned \_\_\_\_\_ Student n. \_\_\_\_\_

E-mail: \_\_\_\_\_

Currently enrolled in the Master's degree course in

REQUEST:

the appointment of the Co-Supervisors for my Master's degree thesis

Title of the Thesis: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Supervisor: \_\_\_\_\_

E-mail: \_\_\_\_\_

Tutor (if applicable: a tutor is appointed when the Supervisor does not hold a teaching position at the Department of Biology):

E-mail: \_\_\_\_\_

External Supervisor (if applicable):

E-mail: \_\_\_\_\_

DECLARE:

that I will submit the graduation application for the graduation session scheduled  
in (month) \_\_\_\_\_ (year \_\_\_\_\_)

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Place: \_\_\_\_\_

Student's signature:

\_\_\_\_\_

To be sent to [tesi-bio@biologia.unipi.it](mailto:tesi-bio@biologia.unipi.it)

I am enclosing an abstract of the thesis (maximum 1 page in length)