



**Request to claim summer/winter school attendance within
the 20% external attendance hours**

(to be filled in, signed, and returned to phd.bmcs@unipd.it)

Winter/summer school name

Winter/summer school URL

Length in hours

Institute organizing the winter/summer school

Winter/summer school dates

Name of Ph.D. student submitting this request

Name of supervisor

Date

PHD STUDENT'S SIGNATURE

Date

SUPERVISOR'S SIGNATURE
