



DEGREE APPLICATION FORM PhD studies

E-mail: examen@mau.se
or post: Malmö University
205 06 Malmö

APPLICANT INFORMATION

Last Name	First Name	Swedish Personal Identity Number (personnummer)	
Address		Zip Code	City
Country	E-mail	Phone Number	

DEGREES

Licentiate Degrees <input type="checkbox"/> Degree of Licentiate of Philosophy <input type="checkbox"/> Degree of Licentiate in Odontology	Doctoral Degrees <input type="checkbox"/> Degree of Doctor of Philosophy <input type="checkbox"/> Degree of Doctor in Odontology
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SIGNATURE

Date	Signature Applicant
Date	Signature Supervisor/Examiner

INSTRUCTIONS

- **Check the transcript of record (Ladok) to make sure that all courses to be included in the degree are on record. Please attach a transcript where you have marked the courses to be included in the degree.**
- **Only completed courses can be included in the degree and must be agreed with your Supervisor/Examiner.**
- **Degrees are bilingual and are issued in both Swedish and English.**
- **In case your degree application is rejected, you have the right to appeal that decision in accordance to the Higher Education Ordinance.**