



PÁZMÁNY

Pázmány Péter Catholic University
Faculty of Humanities and Social Sciences

Doctoral and Habilitation Office

Institutional ID: FI79633
H-1088 Budapest, Mikszáth Kálmán tér 1.

REGISTRATION FORM FOR A COMPLEX EXAM

I ask to be allowed to take a complex exam in

..... discipline

..... doctoral school

..... speciality.

Name:

Mother's maiden name:

Citizenship:

Place of birth (city/county/country):

Month, day, and year of birth:

Neptun code:

Permanent address:

Phone number:

Email:

The language of the doctoral program: Hungarian / other (please specify:)

Type of doctoral program: state scholarship-funded / self-funding

Name and academic qualifications of the supervisor:

The language of the doctoral procedure: Hungarian / other (please specify:)

Name of the doctoral topics:

Dated:

Applicant's signature



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The supervisor's recommendation for the members of the external committee for the complex exam and its topics

Candidate name:

Doctoral school:

Title of the pending dissertation:

Name and academic qualifications of the supervisor:

The supervisor's recommendation for the external members of the complex exam committee:

Theoretical topics of the complex exam

- 1.
- 2.
- 3.

Date (semester) of the complex exam:

Date:

Supervisor's signature:

Signature of the Head of the Doctoral School