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**Application for Admission to Presentation and Discussion of the Doctoral Proposal (1st year)**

President of the Scientific Council

Faculty of Pharmacy, University of Lisbon

I hereby, **(name)**, National Identity Card/Passport nr. **(number)**,valid until **(date)**, living at **(complete address)**, phone number **(phone number)**, and email **(email)**, request acceptance of this application for admission to the presentation and discussion of the doctoral proposal in the main scientific area of Pharmacy, specialty in **(specialty)**.

For this purpose, I submit to the Scientific Council the report of the Doctorate Couse (1st year) with the thesis title **(thesis title)**, having as supervisor the Professor (name and affiliation) and co-supervisor the Professor (name and affiliation).

Lisbon, **(date)**.

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(Signature)