



**COTUTELLE AGREEMENT ON CO-SUPERVISION IN
DOCTORAL EDUCATION
SET UP FORM**

Partner University: _____

In order to facilitate the process for the setting up of the co-tutelle agreement, please provide the following information:

Competent office: _____

Name and surname of the person in charge: _____

Email: _____

Doctoral candidate: _____

E-mail: _____

Doctoral Research Programme at the Partner University:

Politecnico di Torino Thesis Supervisor: _____

E-mail: _____

Partner University Thesis Supervisor: _____

E-mail: _____

Scientific motivations supporting the request (please specify the scientific motivations which will be examined by the Co-tutelle Board):

Date _____



**Politecnico
di Torino**

OUTGOING COTUTELLE

Prof. [.....]
PoliTO Thesis Supervisor

Prof. [.....]
Partner University Thesis Supervisor

Prof. [.....]
Director of the Doctoral Research Programme [.....]