

**EPFL Doctoral School
DOCTORAL PROGRAM in Neuroscience
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**REQUEST FOR EXTERNAL (OUTSIDE EPFL) COURSE CREDITS
INCLUDING THE UNIL & UNIGE PHD COURSES AND THE EPFL BA-MA COURSES**

*Please submit this form and supporting information well in advance of the
start date of the course (3 weeks required).*

*PLEASE NOTE: Failure to receive written approval from the Program Director
BEFORE the course starts disqualifies the student from earning credits*

1. Name _____ First name _____

2. Course title _____

3. Course reference (if any) _____

4. Course provider and location (University or other) _____

5. Instructor _____

6. Dates of course _____

7. Amount of lecture hours _____ Amount of additional personal work hours _____

8. Amount of ECTS announced by the organizing institution _____

9. Evaluation method(s) project ☐ Oral exam ☐ Written exam ☐

Other ☐, specify : _____

Course syllabus/description attached with detailed schedule (**mandatory**) ☐

PhD advisor's signature _____

Candidate's signature _____

EDNE Director's approval: _____ **Date:** _____

For internal EDNE & SAC-EDOC use

Marks obtained by the candidate **R** (Réussi) passed ☐ **E** (Echec) failed ☐

Credit unit(s) to be transferred _____ **Corresponding IS-A ref : Equiv.** _____