

Registrar's Office Doctoral Students' Office

Visiting Doctoral Student - Extension of stay

Please fill this form and send it - with attachments - by email only to sac-doctorants@epfl.ch

All fields are mandatory

Please provide ι	ıs with						
duration of you	□ a new certificate (proof) of PhD studies from your home university, valid for the duration of your extended stay at EPFL (pdf format, < 1MB)						
 a copy of the new invitation letter sent by your hosting lab at EPFL covering the new dates of your stay 							
Personal information							
Legal Family Name (as it appears in passport)				First Nam	е		
SCIPER number (6 digits - ex: 123456)							
New duration of stay (extension)		From			(dd.mm.yyyy)		
Doctoral Program					Ask th	e Prof/MER in charge of your stay at EPFL	
EPFL Professor/MER in charge during your stay at EPFL							
Prof/MER full name							
Hosting lab name (acronym)							
Full address of your hosting l	ab						
Email address of the adminis	trative a	ssistant					