**UNIVERSITY OF WESTERN MACEDONIA  
DEPARTMENT OF MATHEMATICS**

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| **APPLICATION** |  | **To : Department of Mathematics** |
| **First Name :** |  | Please, accept my candidature for the position |
| **Last Name :** |  | of PhD candidate for a doctoral dissertation |
| **Father's First Name :** |  | entitled "\_\_\_\_\_", in accordance with the |
| **Address :** |  | application no. \_\_\_\_\_ (Web Number:\_\_\_\_\_\_\_\_\_) |
|  |  | Announcement of the Department. |
| **Phone Number :** |  |  |
| **ID Number :** |  |  |
|  |  |  |
|  |  |  |
| ***Attachments***: |  | **Kastoria / /20** |
| 1.  2.  3.  4.  5.  6.  7.  8.  9.  10.  11.  12. |  | **The Applicant**  **(Signature)** |