



Escuela de Doctorado
Universidad Zaragoza

Date:

Thesis Committee Number:

Recipient:

**Mr./Ms. DIRECTOR OF THE DOCTORAL SCHOOL OF
THE UNIVERSITY OF ZARAGOZA**

**Campus San Francisco, C/ Pedro Cerbuna, 12 50009-
Zaragoza**

**NOTICE OF THE DEFENSE OF THE DOCTORAL THESIS SUBMITTED BY THE PHD CANDIDATE
Mr./Ms.**

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TIME:

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(if not in person, indicate "VIDEOCONFERENCE")

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(only in the case of a defense carried out entirely by VIDEOCONFERENCE)

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Signature:

This notice must be sent to the Thesis Office (tesis@unizar.es) at least 10 working days before the date of the defense.