PhD in Information and Communication Technologies University of L'Aquila

REPORT ON THE ACTIVITIES OF THE CURRENT YEAR

LAST NAME	
NAME	
CURRICULUM	
DOCTORAL CYCLE	

RESEARCH ACTIVITY REPORT				
Research area	Insert here a broad area of research, such as signal processing, wireless communications, solid state electronics, remote sensing			
Description of research activities	Insert here a detailed description of the research activities carried out during the current year			
Mobility	Insert here collaborations with other research groups based on research framework and stays abroad in foreign institutions that excel in the selected research topic (name of institution, duration of stay, name of reference mentor)			

List of Publications on Journals, and Conferences. Seminars	

ADVANCED COUR	RSES				
Course	Туре	Duration/Period	CFU	Ph.D. Year	Skills
Insert here the name of the advanced course	Insert here course type, e.g. Master Degree course, PhD course, summer / winter school, other (specify)	Insert duration (measured in hours or days) and period of year			Insert here a detailed explanation of why the course/school was selected and how it connects with the research area of the PhD student.

	Total CFU		

SEMINARS AND	OTHER ACTIVITIES				
Activity title	Activity type	Duration/Period	CFU	Ph.D. Year	Skills
nsert here the title of the activity	Insert title of activity (seminar, laboratory sessions) and a description of goals and expected results	Insert duration (measured in hours or days) and period of year			Insert here a detailed explanation of why the course/school was selected and how connects with the research area of the PhD student.

	Total CFU		

ACHING ACTIVITIES	5			
Course	Туре	Duration/Period	Ph.D. Year	Skills
rt here the name of the course	Insert here course type, e.g. master-level course, bachelor-course, etc.	Insert duration (measured in hours or days) and period of year		Insert here a detailed explanation of why the course/school was selected and how it connects with the research area of the PhD student.

SIGNATURES	
Prof. Dr.	SUPERVISOR: Name and last name
	Insert here the signature of the Supervisor
Prof. Dr.	RESPONSIBLE OF THE REFERENCE GROUP: Name and last name
	Insert here the signature of the responsible of the Reference Group

Date

Signature of the Doctoral student