



APPOINTMENT OF PhD SUPERVISOR(S)

THE UNDERSIGNED

Gender Male Female

Surname _____

First names (in full) _____

Born on Day _____ Month _____ Year _____

Born in _____

Address _____

Postal code _____

Town/City _____

Faculty/Institute _____

Phonenumber private _____ work _____

E-mail _____

MASTER

Master's degree in _____

Completed the Master succesfully on Day _____ Month _____ Year _____

University _____

Town/City _____

SUPERVISOR(S)

Title and name _____	Title and name _____
Date _____	Date _____
Signature	Signature

Be appointed as his/her phd supervisor(s), and the phd supervisor(s) request that:

CO-SUPERVISOR(S)

Title _____	Title _____
Name _____	Name _____

be appointed as co-supervisor(s). (N.B. The sum of phd supervisors and co-supervisors should not be more than 3)

THE PROVISIONAL TITLE OF THE DISSERTATION/TECHNICAL DESIGN IS:

Title _____

Signature PhD Candidate

Please append master's degree certificate including proof of validation for foreign degree certificates.