Gdańsk, …………………………… 20……

Doctoral Student’s name: ………………………………………………………

Doctoral school: ….…………………………………………………………………

Field of science: …………………………………………………………………….

Discipline of science: …………………………………………………………….

……………………………………………………………………………………………..

**Chairperson of the Discipline of Science Council**

 ***Discipline of science***

**REQUEST**

**FOR THE APPOINTMENT OF AN ADVISOR**

Hereby I request to have ……………………………………………………………………………… (*name and academic degree/rank*) appointed as a thesis advisor providing supervisory care over the preparation of a doctoral dissertation.

……………………………………………………………………….

*Doctoral student’s signature*

**CONSENT
FOR ASSUMING THE ROLE OF AN ADVISOR**

Hereby I consent to serve as a thesis advisor providing supervisory care over the preparation of a doctoral dissertation of ……………………………………………………………………………… (*Doctoral student’s name*).

………………………………………………………………………………….

*Signature of the candidate for an advisor*

**CONCLUSION OF THE DEAN OF *(Faculty of …)*,**

**where the candidate for an advisor is employed\***

…………………………………………………………………………………………………………………………………………………………………………………..……………………………………………………………………………………………………………………………….………………………….………………………..…………………………………………………………………………………………………………………………………………….………………………………………………………………………………………………………………..………………………………………………………………………………………………..…………………………………………………….....

………………………………………………………………………………….

*Dean’s signature*

**CONCLUSION OF THE DIRECTOR OF LIFE SCIENCES AND MATHEMATICS INTERDISCIPLINARY DOCTORAL STUDIES**

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………………………………………………………………………………….

*Director’s signature*

**\*** The conclusion should include the candidate’s didactic responsibilities and potentially anticipated sabbatical leave and other types of absence specified in section 56 paragraph 1 of the Work Regulations of the University of Gdańsk.