Doctoral School of Social Sciences of the Jagiellonian University in Krakow

(DSSS JU)

..................................................................  Kraków, ................................

First and last name  Date

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Album number

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Scientific discipline

**Chairman of the Discipline Board**

**............................................................**

(name of the scientific discipline)

**............................................................**

(academic degree / title, name and surname)

**through**

**Director of the Doctoral School of Social Sciences of the Jagiellonian University**

**Dr hab. Anna Zachorowska -Mazurkiewicz, prof. UJ**

**Application for change of a supervisor/an auxiliary supervisor**

Pursuant to §14 in conjunction with §11 of the Jagiellonian University Doctoral Schools Regulations I request the change of my supervisor/ auxiliary supervisor through the recall of ...................................................................................................................................

                                                             (academic degree / title, first and last name of the supervisor)

as the supervisor/ auxiliary in the field ofc….……………………..............................,

in the discipline: …………………………………………………………………………………………………………….

Substantiation:. .............................................................................................................................................................................................................................................................................................................................................................. ............................................................................................................................................................................................ ............................................................................................................................................................................................

**........................................**

**Doctoral student's signature**