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

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

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

**Application to supplement the doctoral committee**

Pursuant to §15 (1) of the Jagiellonian Universitu Doctoral Schools Regulations

I request the appointment of .............................................................................................

(academic degree/title, name and surname )

as a member of the member of the doctoral committee of ……………………………………… in the discipline ……………………………..

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

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

**Doctoral student's signature**

 The opinion of the supervisor: ..............................................................................

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

**Supervisor’s signature**

The opinion of the supervisor: ..............................................................................

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**Supervisor’s signature**

The opinion of the head of the doctoral program: ..............................................................................

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**Doctoral program head’s signature**