

Application for addition of assistant supervisor

To be completed by the doctoral student and signed by the new assistant supervisor

Personal data

Surname First name

Personal identity number

New assistant supervisor

Surname First name

Employed at Title

Email address

Start date for new assistant supervisorship

Doctoral student

Date

Signature

Clarification of signature

New assistant supervisor

Date

Signature

Clarification of signature

To be completed by the dean of research

Application Date

Approved Rejected

Signature

Clarification of signature