Poznań, on.................................

..........................................................

Name and surname

..........................................................

PESEL/Passport No

..........................................................

Album No

..........................................................

Correspondence address

..........................................................

Unit where education at the doctoral school

is carried out

***Professor Ewa Wender-Ożegowska, DSc, PhD, MD***

***Director of the Doctoral School***

***Poznan University of Medical Sciences***

**Application for the appointment of the supervisor / supervisors / supervisor and auxiliary supervisor**

Acting pursuant to Art. 185 sec. 1 of the Act of July 20, 2018 - Law on Higher Education and Science (Journal of Laws 2023, item 742, as amended) and § 2 clause 5 point 1 of the Resolution of the Senate of the Poznan University of Medical Sciences No. 69/2023 of April 26, 2023, I would like to kindly request the appointment of a supervisor, supervisors, assistant supervisor[[1]](#footnote-1) in the procedure for awarding a doctoral degree in the field of medical sciences and health sciences, in the discipline of medical science, pharmaceutical sciences, health sciences

I suggest the following persons:

1 ....................................................... - Promoter,

*title, academic degree, name and surname*

Reason:

………………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………

2 ................................. ......................- Promoter ,

*title, academic degree, name and surname*

Reason:

………………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………

3 .......................................................- Auxiliary promoter .

*academic degree, name and surname*

Reason:

………………………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………

**Proposed title of the doctoral dissertation:** ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….

**Purpose and objectives of the doctoral dissertation (max 500 words)**

…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

…………………………………………………………… ………………………………………………………………

Consent to act as a promoter Legible signature of the doctoral student

In case of appointing two supervisors In case of appointing an auxiliary supervisor

(below the signature of the second supervisor) (below the signature of the auxiliary supervisor)

……………………………………………………………… ………………………………………………………………

Consent to act as a promoter Consent to act as an auxiliary promoter

………………………………………………………………

Acceptance by the head of the department

**Promoter's statement**

I declare that I agree to act as a promoter in the procedure for awarding the degree of Doctor Mr / Ms .......................................................... and that I meet the requirements to perform the function of a promoter specified in art. 190 paragraph pos. 4 or 5 of the Act of July 20, 2018. Law on higher education and science (Journal of Laws of 2023, item 742, as amended).

At the same time, I declare that in the last 5 years I have not been the supervisor of 4 doctoral students who were removed from the list of doctoral students due to the negative result of the mid-term evaluation and I did not supervise the preparation of the dissertation by at least two applicants for the doctoral degree who did not receive positive reviews referred to in Art. 191 paragraph. 1 of the act.

I also declare that at present I am not subject to the disciplinary penalty referred to in Art. 276 (1) (4) of the above-mentioned Act on the deprivation of the right to perform the tasks of a supervisor, reviewer and member of the commission in proceedings for awarding the degree of doctor, the doctor science degree and the title of professor for a period of one to 5 years

……………………………………………………………… ………………………………………………………………

*(signature of the proposed supervisor) (signature of the proposed supervisor / auxiliary supervisor)*

**Promoter's statement**

I declare that I agree to the appointment of an auxiliary supervisor in the procedure for awarding the doctoral degree to Mr. / Mrs. ……………………………….

………………………………………………………..

*(signature of the proposed supervisor)*

**Decision of the Director of the Doctoral School**

I am appointing Mrs/Mr…………………………………………………………………………………………………………………… as the dissertation supervisor of a participant of a doctoral school ………………………………………………………

I am appointing Mrs/Mr …………………………………………………………………………………………………………………… as the dissertation supervisor of a participant of a doctoral school ………………………………………………………

I am appointing Mrs/Mr …………………………………………………………………………………………………………………... as an auxiliary supervisor of a doctoral dissertation of a doctoral school participant..............................................................................................................................................

.......................................................

*signature of the Director of the Doctoral School*

**Attachments:**

1. **1. The opinion of the local Bioethics Committee or the local Animal Research Ethics Committee or the statement of the candidate for the promoter (candidates for promoters) with the justification that such consent is not required.**
2. **Opinion of the Chair / Scientific Council of the Institute.**

1. delete as appropriate [↑](#footnote-ref-1)