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| **Application to the Council for Academic Discipline**  ***please click to select from the list***  **regarding approval of Individual Research Plan (IRP), approval of the title of the doctoral dissertation, appointment of supervisor/s**  Krakow, date **\_\_\_\_\_\_\_\_\_\_**  Name and surname **\_\_\_\_\_\_\_\_\_\_\_\_\_**  Album number \_\_\_\_\_\_\_\_\_\_\_\_\_telephone number **\_\_\_\_\_\_\_\_\_\_\_\_\_**  e-mail address **\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Dear Sir/Madam**  ***please click to select from the list***  **Chairman of the Council of the Discipline  *please click to select from the list***  I kindly ask for approval by the Council of the Discipline ***please click to select from the list***:   * individual research plan prepared by me (attached) * proposed title of doctoral dissertation **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   and for the appointment of:   * supervisor/supervisors **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** * auxiliary supervisor \***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**   Additional information:  Participant of CUE Doctoral Program from ……  Please find enclosed the individual research plan and the minutes of the scientific meeting.  …….……………………………………………………….  Signature |

\*-delete as appropriate