APPLICATION FOR RESERARCH STAY AUTHORISATION

DOCTORAL CANDIDATE

Surname(s), name:

E-mail:	NIP :

Doctoral Programme:

THESIS DIRECTOR(S)

(1)Surname(s), name:

(2)Surname(s), name:

TUTOR (only if not same as director)

Surname(s), name:

REQUESTS

Authorisation from the Academic Commission for the Doctoral Programme in

………………...

to undertake a research stay from ………………… to ……………

in the department/institute/centre at ………………….............................………………

University/Institution:…………………... Country: ………………..

In witness whereof, I sign the present in

, on…… …………………… …   The candidate:

Signed: ………………………................……..

Approved by Thesis Director (1)	Approved by Thesis Director(2)	Approved by Tutor
Signed: ………………………….	Signed: ………………………….	Signed ……………………..…

DECISION FROM THE ACADEMIC COMMISSION

The academic commission of the Doctoral Programme in

…………………………………………………………………………………………………….. ....

after evaluating the reseearch plan and the suitability of the stay for the thesis research plan and the skills that the doctoral student must acquire during the time of stay AUTHORIZES / DOES NOT AUTHORIZE the requested stay.

on…… ………………   20…   The Doctorate Programme Coordinator

Signed: ……………........……………

Work plan and activities to be carried out during the stay, specifying their adequacy to the thesis research plan

NOTE, once the stay is over, a report from the doctoral student will be provided on the work carried out as well as the report from the person in charge of the stay

Procedure:
The decision made by the Programme´s Academic Commission is sent by the programme´s office to the candidate and a copy to the section ar the School of Doctoral Studies.