

DECLARATION

I agree to provide scientific supervision of the applicant*) to the Interdisciplinary Doctoral School of Lodz University of Technology

Mr/Ms*)
(the name of the applicant, including the professional title)

the doctoral dissertation will be carried out in:

.....
(unit name)

I declare that I meet the requirements for supervisors in my discipline and that the subject and scope of research presented by the applicant to IDS TUL has been accepted by me.

.....
title / academic degree of the supervisor, name and surname

.....
legible signature

Consent of the Chairperson of the TUL Discipline Council:

.....
title / academic degree of the Chairperson of the Discipline Council, name and surname

.....
legible signature

I consent to the performance of my doctoral dissertation by Mr/Ms*)

.....
name and surname of the applicant

W
unit name

.....
title/degree of head of unit (Institute/Department) name and surname

.....
legible signature