

DOCTORAL STUDENT'S DECLARATION OF A DOCTORAL THESIS SUBMISSION

.....
(City, date)

.....
Doctoral student's name and surname

.....
PESEL or passport number

.....
Chosen Discipline of Science

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Thesis Supervisor/ Supervisors (name, surname, academic degree/academic title)

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Auxiliary Thesis Supervisor (name, surname, degree)

.....
Doctoral thesis title

I hereby submit the doctoral thesis to competent authorities and I declare that I have submitted the doctoral thesis in accordance with § 37.2 of the Regulations of the Doctoral School of the University of Szczecin adopted under a resolution of the Senate of the University of Szczecin No. 60/2022 dated 28 April 2022 regarding the adoption of the Regulations of the Doctoral School of the University of Szczecin.

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Date, doctoral student's legible signature

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Confirmation of doctoral thesis submission
(date of receipt, name and surname
of an administrative employee)

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Date of receipt of this certificate to the Doctoral School Office
(confirmed by an administrative employee of the Doctoral School Office)