Universität Potsdam

Math.-Nat. Fakultät

Geschäftsstelle des Promotionsausschusses

Karl-Liebknecht-Str. 24-25

14476 Potsdam OT Golm

**Doctoral procedure of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Dear Sirs or Madams,

I hereby apply for a change of supervisor in the above-mentioned doctoral procedure

Supervisor team OLD:

Main supervisor:

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Second supervisor, if applicable: independent

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|  |

Mentor, if applicable: independent

Supervisor team NEW:

Main supervisor: Prof.

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Second supervisor: independent

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|  |

Mentor, if applicable: independent

Short explanation:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ .

Yours sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name doctoral candidate signature doctoral candidate

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature principle supervisor NEW Signature second supervisor NEW Signature mentor NEW