Model declaration concerning consent to act as a supervisor or auxiliary supervisor

	Gdańsk, 20
(name and surname, degree/title held)	
address	
University/Institution	
	Headmaster of the Doctoral School of the Stanisław Moniuszko Academy of Music in Gdańsk
of the doctoral dissertation of	inted to act as a Supervisor/Auxiliary Supervisor*
	there are no circumstances set out in paragraph
	Yours sincerely
	signature

^{*}Proposals for supervisor or auxiliary supervisors should be provided if necessary.