

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 Stanisław Moniuszko
Academy of Music in Gdańsk**

.....

I hereby agree to be appointed to act as a Supervisor/Auxiliary
Supervisor* of the doctoral dissertation of, MA

.....

Simultaneously, I declare that there are no circumstances set out in paragraph
13(4) of the Doctoral School Regulations.

Yours sincerely

.....

signature