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|  | Toruń, …………………  date |
| ………………………………………  Name and surmane  ………………………………………  Index number  ………………………………………  Year of education |  |
| Prof. dr hab. Wiesław Nowak  Doctoral School of Exact and Natural Sciences | |
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| APPLICATION FOR CONSENT TO PARTICIPATE IN THE CONFERENCE | |
|  | |
| *(please indicate whether the you have already been entered on the list of conference participants; provide the name of the conference, date and place, conference organiser, form of participation (with or without a talk/poster), justification for participation - especially in the case of passive participation, estimated costs of participation in the conference and source of financing, information on possible planned post-conference publications)*  I undertake to submit a written report on the trip within 30 days from the date of return. | |
|  | ……………………………………………………  PhD candidate signature |
| Opinion of the supervisor(s) *(may be attached as a separate document)* | |
| ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | |
|  | ……………………………………………………  Supervisor(s) sigature |
| Decision of PhD School Director | |
| ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | |
|  | ……………………………………………………  Stamp and signature |