**APPLICATION FOR**

**MID-TERM EVALUATION**

**of the PhD student attending the Doctoral School at the University of Silesia in Katowice**

Date of commencement of education: academic year 2019/2020

1. **Data of the PhD student and information about the supervisors**
2. Name and last name of the PhD student:

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1. ORCID:

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1. Scientific discipline:

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**I request a mid-term evaluation as part of my education in the Doctoral School. I declare that I have completed my second year of study and I am ready to undertake the mid-term evaluation. I am submitting an Individual Research Plan Report with my application.**

Date and PhD student’s signature:

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Date and supervisor’s signature:

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