|  |  |
| --- | --- |
| **Name and Surname** |  |
| **Academic degree/ title** |  |
| **Unit** |  |
| **Role** *(delete as appropriate)* | Supervisor/ Additional Supervisor  |
| **Date of appointment as the supervisor (month, year)** |  |
| **Discipline** |  |
| **Name and Surname of the doctoral student** |  |

**Opinion on the progress of the doctoral student in implementation of the Individual Research Plan**

Signature:

Date: