Warsaw, …………………………..

…………………………..

name, surname

assistant supervisor

…………………………..

e-mail address

**OPINION**

According to Art. 202 sec. 1 of the Act of July 20, 2018 - Law on Higher Education and Science,

I give a

positive / negative

opinion on the Individual Research Plan of a doctoral student

………………………………………………………………………………………………......

name and surname of doctoral student

……………………………………..

Date and signature