Application form for preparation of DOCTORAL THESIS

\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 202\_\_.

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| email | telephone number |
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| **Title of doctoral thesis** |  |
| **Represented structural unit or institution of UL** |  |
| **Date of doctoral thesis defense** |  |
| **Doctoral degree to be obtained** | doctor of science *(Ph.D.)*  field of science  subfield |
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