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| Before submitting the application, verify the compliance of the requirement with the **Study and Examination Regulations of CTU** and the **Rules of Doctoral Studies of FA**. | |
| Name, Surname and Academic Title: |  |
| Title of dissertation: |  |
| PhD Study Program: | Architecture and Urbanism / Smart Cities / Design  Please delete those that do not apply. |
| Field of Studies: | Architecture, Theory and Creation / ATT  Urban Design and Spatial Planning / UUP  History of Architecture and Monument Conservation / DAPP  Architecture, Building and Technology / AST  Landscape Architecture / KA  Delete those that do not apply |
| Form of Studies: | Full-time / part-time  Please delete those that do not apply. |
| Beginning Date of Studies: |  |
| Studies interrupted from-to:  e. g. Interruption of Study in Recognized Periods of Parenthood |  | |
| Semester of Studies:  resulting from the previous 2 lines |  | |
| Number and Name of Department: |  |
| Supervisor: |  |
| I am requesting: |  | |
| Reason: |  | |
| Doctoral student's signature: |  | |
| Date: |  | |
| Supervisor's statement: | Recommended/Not recommended  Please delete or cross out those that do not apply. | |
| Supervisor's signature: |  | |
| Date: |  | |
| Statement of the head of the department: | Recommended/Not recommended  Please delete or cross out all that do not apply. | |
| Signature of the head of the department: |  | |
| Date: |  | |
| The document was received in VVUČ department by: |  | |
| Date: |  | |
| Statement of the Vice-dean of VVUČ: | Recommended/Not recommended  Please delete or cross out all that do not apply. | |
| Date: |  | |
| Statement of the Dean: | Recommended/Not recommended  Please delete or cross out all that do not apply. | |
| Date: |  | |