**Request for permission to attend a conference for Doctoral Students   
at the Doctoral School**

1. Last name: **Please click or tap here to enter text.**
2. First name: **Please click or tap here to enter text.**
3. Educational profile: **Please click or tap here to enter text.**
4. Education year: **Please click or tap here to enter text.**
5. Album number: **Please click or tap here to enter text.**
6. Conference organiser: **Please click or tap here to enter text.**
7. Date: **Please click or tap here to enter text.**
8. Place: **Please click or tap here to enter text.**
9. Conference title: **Please click or tap here to enter text.**
10. Presentation format:

paper, title: **Please click or tap here to enter text.**

poster, title: **Please click or tap here to enter text.**

1. Reasons for participation (max. 500 words):  
   …………………………………………………………………………………………
2. Costs:

|  |  |  |  |
| --- | --- | --- | --- |
| No. | Cost type | Amount | Source of funding |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*Appendixes:  
1. Confirmation the acceptance of the paper for the conference*

*2. The conference program, which clearly includes information about the presentation of the paper/poster*

Warsaw, Please click or tap here to enter the date.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature of the Doctoral Student

**Supervisor’s opinion:** Please click or tap here to enter text. *first and last name of the Supervisor*

*I hereby confirm that the participation of the Doctoral Student in the conference is related to the implementation of his/her Individual Research Plan.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature of the Supervisor

**Dean’s decision:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_