**EXTERNAL EVALUATORS**



|  |
| --- |
| Doctoral student:  |
| Title of the Doctoral Thesis:  |
| Doctoral Programme: **Political and Social Sciences** | Deposit date: |
| Supervisor 1: University:  | NATIONAL ID NO.: E-mail:  |
| Supervisor 2: University:  | NATIONAL ID NO.: E-mail:  |

|  |  |  |
| --- | --- | --- |
| Joint Supervision ***(Cotutela)*** : Yes  **Not** |  | Videoconference: Yes  **Not** |

**PROPOSED DOCTORAL THESIS EXTERNAL EVALUATORS \***

|  |  |  |
| --- | --- | --- |
|  | **Name and surname(s)** | **University** |
| **Evaluator 1** |  |  |
| **Evaluator 2** |  |  |
| **PROPOSED SUBSTITUTE DOCTORAL THESIS EXTERNAL EVALUATORS \*** |
| **Substitute 1** |  |  |
| **Substitute 2** |  |  |
| **Substitute 3** |  |  |

|  |  |
| --- | --- |
|  *(date)* | *Signature(s) of the doctoral thesis supervisor(s)* |

|  |
| --- |
| Academic committee approval:  |
| *(date)* |

\*Attached: Suitability reports on the 2 proposed evaluators and 3 proposed substitute evaluators

|  |
| --- |
| PROPOSAL FOR EXTERNAL EVALUATOR 1 |
| Dr.:  | National ID /passport no.: |
| Doctor from the University:  | Year:  |  |
| University/Research Centre:  | Academic category: |  |
| Department/Institution: |  |
| Contact postal address: | E-mail:  |
| Contact telephone:  |  | Contact fax number: |

|  |
| --- |
| **SUITABILITY REPORT** |
| * **Explanation of the research done in the subject area of the thesis (preferably in the last 5 years) justifying knowledge of the subject and accrediting the doctor proposed as an external evaluator.**
* **List of 5 publications or relevant contributions (preferably in the last 5 years) accrediting the scientific value of the proposed external evaluator.**
 |

|  |
| --- |
| PROPOSAL FOR EXTERNAL EVALUATOR 2 |
| Dr.:  | National ID /passport no.: |
| Doctor from the University:  | Year:  |  |
| University/Research Centre:  | Academic category: |  |
| Department/Institution: |  |
| Contact postal address: | E-mail:  |
| Contact telephone:  |  | Contact fax number: |

|  |
| --- |
| **SUITABILITY REPORT** |
| * **Explanation of the research done in the subject area of the thesis (preferably in the last 5 years) justifying knowledge of the subject and accrediting the doctor proposed as an external evaluator.**
* **List of 5 publications or relevant contributions (preferably in the last 5 years) accrediting the scientific value of the proposed external evaluator.**
 |

|  |
| --- |
| PROPOSAL FOR EXTERNAL EVALUATOR 3 |
| Dr.:  | National ID /passport no.: |
| Doctor from the University:  | Year:  |  |
| University/Research Centre:  | Academic category: |  |
| Department/Institution: |  |
| Contact postal address: | E-mail:  |
| Contact telephone:  |  | Contact fax number: |

|  |
| --- |
| **SUITABILITY REPORT** |
| * **Explanation of the research done in the subject area of the thesis (preferably in the last 5 years) justifying knowledge of the subject and accrediting the doctor proposed as an external evaluator.**
* **List of 5 publications or relevant contributions (preferably in the last 5 years) accrediting the scientific value of the proposed external evaluator.**
 |

|  |
| --- |
| PROPOSAL FOR EXTERNAL EVALUATOR 4 |
| Dr.:  | National ID /passport no.: |
| Doctor from the University:  | Year:  |  |
| University/Research Centre:  | Academic category: |  |
| Department/Institution: |  |
| Contact postal address: | E-mail:  |
| Contact telephone:  |  | Contact fax number: |

|  |
| --- |
| **SUITABILITY REPORT** |
| * **Explanation of the research done in the subject area of the thesis (preferably in the last 5 years) justifying knowledge of the subject and accrediting the doctor proposed as an external evaluator.**
* **List of 5 publications or relevant contributions (preferably in the last 5 years) accrediting the scientific value of the proposed external evaluator.**
 |

|  |
| --- |
| PROPOSAL FOR EXTERNAL EVALUATOR 5 |
| Dr.:  | National ID /passport no.: |
| Doctor from the University:  | Year:  |  |
| University/Research Centre:  | Academic category: |  |
| Department/Institution: |  |
| Contact postal address: | E-mail:  |
| Contact telephone:  |  | Contact fax number: |