

**Doctoral Pogram in Translation and Language Sciences**

**Application for incorporation, deregistration or change of (co)supervisor**

Name and surname: DNI/Passport:

Adress mail:

**I EXPOSE:**

That I am preparing my doctoral thesis and wish to request (please choose the appropriate option):

**Change of supervisor**

First and last name of previous supervisor, and signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First and last name of new supervisor, and signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(University or Research Centre, and email adddress) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Incorporation of cosupervisor**

First and last name of previous supervisor, and signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First and last name of new cosupervisor, and signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Universidad o Centro de investigación y dirección electrónica) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Deregistration of cosupervisor**

First and last name of the supervisor who remains, and signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First and last name of the supervisor who leaves, and signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Change of cosupervisor**

First and last name of the cosupervisor who remains, and signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First and last name of the cosupervisor who leaves, and signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

First and last name of the new cosupervisor, and signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(University or Research Centre, and email adddress \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**JUSTIFICACIÓ** (entre150 i 200 paraules). S’ha de fer referència a la possible incidència que els canvis demanats pugin exercir sobre el Pla de Recerca, si aquest ja ha estat defensat.

JUSTIFICATION (between 150 and 200 words). Mention should be made to whether the changes requested may imply a variation of the Research Plan, if this has already been defended.

**I REQUEST:**

That the Academic Committee of the doctoral program accept the proposed changes

**Signatures:**

Doctoral student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Advisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Barcelona, \_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_

\* All signatures included in this document can be handwritten or electronic.