

Form no. 14

Name: _____

Full address: _____

Email/phone.: _____

An den Promotionsausschuss
des Fachbereichs 09 - Sprach- und Kulturwissenschaften
Campus Bockenheim, Juridicum, Hauspostfach 145
60325 Frankfurt am Main

Date: _____

Application for change of supervisor

To whom it may concern,

I herewith apply for the change of supervision to _____.

Date of admission as a doctoral student: _____

Doctoral subject: _____

Former supervisor: _____

Approval by the former supervisor:

Place and date

Signature

Approval by the new supervisor:

Place and date

Signature

Sincerely,

Applicant's signature