

APPLICANT:

(Family name, first name)

(Place, date)

(Postal Address)

(Tel.-No., E-Mail Address)

To the Dean

of the Faculty

of the UNIVERSITY OF POTSDAM

Declaration of intent to do doctoral studies

Dear Sir/Madam,

herewith I want to declare my intent to undertake doctoral studies at the

_____ Faculty of the University of Potsdam, institute/study group for

_____ in the

field of studies _____ with

professor _____ as my supervisor.

My provisional topic:

Expected duration: from _____ to _____

Date: _____

Signature of applicant: _____

The intent of Mrs/Mr _____ to undertake doctoral studies has been accepted.

Date, signature, stamp