

Confirmation of supervision for the admission to the MAPEX Doctoral Qualification Programme (MAPEX-QP)

Main supervisor (MAPEX principal investigator)

Name _____

Faculty _____

Institute _____

I hereby confirm that _____
(name of MAPEX-QP participant) is working as a doctoral candidate in my
research group and/or is being supervised by me.

Date

signature (supervisor, MAPEX principal investigator)

Notes:

*The admission to the MAPEX Doctoral Qualification Programme is independent of
the formal acceptance as a doctoral candidate by the faculty.*

*This confirmation has no legally-binding character and does not interfere with the
formal requirements for doctoral candidates as regulated by the faculties.*