

Supervision Agreement within the Framework of a Doctoral Project at Trier University

This supervision agreement must be completed jointly by the doctoral candidate and the (first) supervisor. Please consult the instructions for completing the supervision agreement.

Updates to the supervision agreement are possible at any time by mutual agreement, must be submitted in writing and signed by all participating parties.

Part 1, also functioning as Registration Form for Doctoral Candidates (pp. 1–3)

A) Participating Parties

Personal Details of the Doctoral Candidate

Form of address	Surname	First Name
_____	_____	_____
Street and house number		Postal code and city
_____		_____
Birth date	Birth place	
_____	_____	
Nationality	Gender	
_____	_____	
E-Mail	Telephone and mobile number	
_____	_____	

Funding of the Doctorate

- | | |
|--|---|
| <input type="checkbox"/> Employment at Trier University | <input type="checkbox"/> Scholarship |
| <input type="checkbox"/> Employment not at Trier University | <input type="checkbox"/> Privately funded |
| <input type="checkbox"/> Project funding _____ | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Currently no specification possible | |

Please note: The obligation to supervise until the completion of the doctorate is independent of the duration of the funding of the doctorate.

Qualifications

Previous degrees (e.g. master): _____

Date of completion: _____

For a master's degree:

Consecutive degree (same as bachelor)

Additional degree (different as bachelor)

Subject(s): _____

Grade: _____

At the university: _____

Country (if outside of Germany): _____

Initial Date of Matriculation/Enrollment

Date of initial matriculation or enrollment in Germany/abroad: _____

If **within Germany**, please specify:

If **outside of Germany**, please specify:

City: _____

Country: _____

University: _____

University: _____

University Entrance Qualification

Date of Completion: _____

Grade: _____

If **within Germany**, please specify:

If **outside of Germany**, please specify:

Type of school: _____
(e.g. Gymnasium/Gesamtschule)

Country: _____

State/Province: _____

German School Abroad

Other School Abroad

County/District: _____

First Supervisor

Title

Surname

First name

Department/Institute

E-Mail

Telephone and/or mobile number

If Applicable: Additional Participating Party (e.g. second supervisor, co-supervising postdoctoral researcher)

Title

Surname

First name

University/College/Department/
Institute etc.

E-Mail

Telephone and/or mobile number

Supervisory role: _____

B) Doctoral Project

B1) Subject

The aim of the project is to earn a degree in accordance with the regulations of the faculty _____ Intended Degree _____
Subject: _____

B2) Topic or Working Title

The doctoral candidate will write a dissertation on the following topic or with the following working title:

B3) Form

According to the options of the doctoral regulations, the dissertation will be a

- monograph cumulative form

B4) Language

The dissertation will be written in

- German English _____

B5) Start Date

Date of commencement of doctoral research project:

B6) Matriculation/Enrollment

Do you plan to matriculate/enroll as a PhD student at Trier University?

- yes no

B7) Participation in a Structred Doctoral Programme:

- If yes, please specify the name of the programme: no

I confirm that the information provided in the supervision agreement is accurate

I confirm that I have entered into a supervision agreement with the above-named doctoral candidate

I confirm that the doctoral candidate was accepted to faculty:

Date, Signature of Doctoral Candidate

Date, Signature of (First) Supervisor

Date, Signature of Dean