|  |  |  |
| --- | --- | --- |
|  | UMEÅ UNIVERSITY Faculty of | DOCTORAL EDUCATION  Change of supervisor or department  Date |

**Doctoral student information**

|  |  |  |
| --- | --- | --- |
| Family name, given name, initials | | Swedish social sec nr/Date of birth |
| Department | E-mail | |

**Mark the box(es) for any information that is/are affected by the change(s)**

**Principal supervisor**  **Assistant supervisor**

**Previous principal supervisor**

|  |  |
| --- | --- |
| Academic title and name | Phone (incl. area code) |
| Department | E-mail |

**New principal supervisor**

|  |  |  |  |
| --- | --- | --- | --- |
| Name | | | Academic title |
| Department/unit, address | | | Female  Male |
| Work title and employer | | | Associate professor  Yes, year       No |
| Phone (incl. area code) | Mobile phone | Fax | Has had formal training in supervision? |
| E-mail | | | Yes, documentation enclosed  No |

**Previous assistant supervisor**

|  |  |
| --- | --- |
| Work title and name | Phone (incl. area code) |
| Department | E-mail |

**New assistant supervisor**

|  |  |  |  |
| --- | --- | --- | --- |
| Name | | | Academic title |
| Department/unit, address | | | Female  Male |
| Work title and employer | | | Associate professor  Yes, year       No |
| Phone (incl. area code) | Mobile phone | Fax | Has had formal training in supervision? |
| E-mail | | | Yes, documentation enclosed  No |

**Change or addition of department**

|  |
| --- |
| Main department where the doctoral student is currently registered |

State the main department as well as other department(s) where the doctoral student should be registered

|  |
| --- |
| Main department |

**Other department(s)**

|  |
| --- |
|  |

**Signatures**

|  |  |  |
| --- | --- | --- |
| Signature (Doctoral student) | Date | Print name |

|  |  |  |
| --- | --- | --- |
| Signature (Principal supervisor) | Date | Print name |

|  |  |  |
| --- | --- | --- |
| Signature (Previous principal supervisor) | Date | Print name |

|  |  |  |
| --- | --- | --- |
| Signature (Assistant supervisor) | Date | Print name |

|  |  |  |
| --- | --- | --- |
| Signature (Previous assistant supervisor) | Date | Print name |

|  |  |  |
| --- | --- | --- |
| Signature (Head of department) | Date | Print name |