

Doctoral School's logo

Lodz, date:

**GRADUAND CERTIFICATE OF CURRICULUM COMPLETION AT UNIVERSITY OF LODZ
DOCTORAL SCHOOL OF**

Graduand Certificate No. /

It is certified that Ms/Mr
(*doctoral student's full name*)

has submitted doctoral dissertation on (date:) with positive evaluation
from supervisor(s) and he/she* finished curriculum at the University of Lodz Doctoral School of

.....
(*name of doctoral school*)

in the following disciplines*:
(*leading discipline*)

.....
(*auxiliary discipline*)

Title of doctoral dissertation:.....
.....
.....

Doctoral supervisor.....
(*academic degree/title, full name*)

Doctoral supervisor:
(*academic degree/title, full name*)

Assistant doctoral supervisor:
(*academic degree/title, full name*)

Ms/Mr* has achieved learning outcomes in the scope of knowledge,
skills and social competence at level 8 of Polish Qualification Framework (8 PQF). The language
competence on B2 level of CEFR has been confirmed / has not been verified* during recruitment
procedure of admission to the Doctoral School.

.....
Stamped and signed by Director of Doctoral School

* niepotrzebne skreślić