**PROPOSAL FOR CHANGE OF THESIS DIRECTOR/TUTOR.**

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| **CHANGE OF** (Mark what is appropriate): [ ]  **DIRECTOR** [ ]  **TUTOR** |

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| **DOCTORAL CANDIDATE** |
| DOCTORAL PROGRAM:       |
| SURNAME(S) AND NAME:       |

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| **OUTGOING DIRECTOR/TUTOR**  |
| SURNAME(S) AND NAME:       |
| ID NUMBER:       | E-MAIL:       | TELEPHONE:      |
| UNIVERSITY OR OTHER INSTITUTION:       |

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| **INCOMING DIRECTOR/TUTOR** |
| SURNAME(S) AND NAME:       |
| ID NUMBER:       | E-MAIL:       | TELEPHONE:      |
| UNIVERSITY OR OTHER INSTITUTION:       |
| DEPARTMENT/INSTITUTE:       |
| ACADEMIC/ADMINISTRATIVE POSITION:       |
| HE/SHE IS A MEMBER OF THE DOCTORAL PROGRAMME IN WHICH THE DOCTORAL CANDIDATE IS ENROLLED: [ ]  YES [ ]  NOIf it is a change of DIRECTOR, and are not yet a member of a Doctorate Program at the University of Cantabria, please fill in the Application to Membership of a Doctoral Program form. If you do not want to become a member of the Program, fill in the Thesis Director Application (External Personal Form)If it is a chage of TUTOR, and are not a member of the Doctorate Program in which the Doctoral Candidate is enrolled, fill in the Application to membership of a Doctoral Program form. |

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| In      , on Haga clic aquí para escribir una fecha.Signature of doctoral candidate:       | In      , on Haga clic aquí para escribir una fecha..Signature of outgoing DIRECTOR/TUTOR:      |
| In      , on Haga clic aquí para escribir una fecha.Sinature of incoming DIRECTOR/TUTOR:       | In      , on Haga clic aquí para escribir una fecha..Signature of Coordinator of the Doctoral Program:      Date of approval by the CAPD: Haga clic aquí para escribir una fecha. |