From:

Full name

Current address

email-addresse

To

Promotionsgeschäftsstelle

Universität Kassel

Moritzstrasse 18

34109 Kassel

**Application for change of supervisor**

My doctoral registration number: doctoral registration number

Dear Sir or Madam,

on DD.MM.YYYY I was accepted as doctoral candidate in the faculty Please select a faculty of the University of Kassel.

My working title is:

Please enter the working title here.

So far my dissertation has been supervised by name of supervisor.

I hereby request a change of supervisor to name of supervisor. The change has become necessary for the following reasons:

Please briefly state the reasons for the change of supervisor.

Kind regards

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date, signature doctoral candidate

Accepting the change of supervisor Accepting the change of supervisor

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Date, signature current supervisor Date, signature new supervisor