Załącznik Nr 5 część a

do Zasad

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| (pieczątka wydziału) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | |  | | | |  | | | |  | | | | Załącznik Nr 5a | | | | | | | | | | | |
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| |  |  |  |  | | --- | --- | --- | --- | | **Imię i nazwisko doktoranta** |  | **Adres do korespondencji** |  | | **Nr telefonu stacjonarnego** |  | **Nr telefonu komórkowego** |  | | **Nr albumu** |  | **Nazwa studiów doktoranckich\*** |  | | **Imię i nazwisko opiekuna naukowego (promotora)** |  | **Imię i nazwisko promotora pomocniczego** |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | |  | | | |  | | | | |  | | | |  | | | |  | | |  | | | | | | |  | | | | | | |
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| |  | | --- | | **Karta przebiegu studiów doktoranckich (część I)** | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | |  | | | |  | | | | |  | | | | **Rok akad. …..../….....** | | | | | | | | | | | |
| |  |  | | --- | --- | |  | **Rok akad. …..../…....** | |  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | |  | | | |  | |  | | | |  | | |  | | | |  | | | |  | | | | | | |  |
| **Zajęcia obowiązkowe** | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Nazwa przedmiotu** | **Imię i nazwisko prowadzącego** | **Semestr zimowy/letni\*\*** | | | **Ocena** | | | **Ilość godzin** | | | | **Ilość punktów ECTS** | | | | | | **Data** | | | **Czytelny podpis prowadzącego zajęcia** | | | |
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| **Zajęcia fakultatywne** | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Nazwa przedmiotu** | **Imię i nazwisko prowadzącego** | **Semestr zimowy/letni\*\*** | | | **Ocena** | | | | **Ilość godzin** | | | **Ilość punktów ECTS** | | | | | **Data** | | | | | **Czytelny podpis prowadzącego zajęcia** | | |
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| \* wpisać pełną nazwę studiów doktoranckich z podaniem formy studiów (stacjonarne lub niestacjonarne) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \*\* wpisać właściwe | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | |  | | | |  | | | |  | | | |  | | | |  | | |  | | | | | | | | |  | | |