DOCTORAL SCHOOL of the University of Agriculture in Krakow

A personal questionnaire of candidate (please fill in capital letters)

Discipline
Faculty
Department
Personal data
Surname
Second name Family name
Date and place of birth
Passport number
Country
Gender
Parents' names
Nationality
Citizenship
Permanent address
Mailing address
Phone number e-mail
Qualifications

Documented knowledge of languages

Language	Speaking	Reading	Writing	Listening
English				

Education

University	Degree	Field of specialization	Date of graduation	Title of thesis

Other documented skills and knowledge	
Job history after graduation (including at the Univer	
Internships, traineeships etc.	
Place	Date
Signature of candida	ate

STATEMENT

I,	e University of Agriculture in g me in the list PhD students of
In case of cancellation of recruitment process or studying in th I will inform about it the Head of Doctoral School as soon as	
	Signature
STATEMENT I state, that I am not a PhD student of other Doctoral School	
	Signature
STATEMENT I state, that I have/do not have* a doctoral degree.	
	Signature
STATEMENT I state, that I am / I am not * employed under the fixed-term a to	d contract).
* Delete where not applicable.	Signature
Place	Date
Signature of candidate	