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| **DR.06 DOCTORAL THESIS TITLE AND/OR MENTOR CHANGE REQUEST[[1]](#footnote-1)**  |
| **DOCTORAL CANDIDATE** |
| **First and last name:** |       |
| **Registration number:** |       | **E-mail:** |       |
| **GENERAL INFORMATION ABOUT THE STUDY PROGRAMME** |
| **Institution responsible for organizing the studies:** |       |
| **Name of study programme:** |       |
| **Name of partner institution** *(in case of dual doctorate)***:** |       |
| **Name of doctoral study programme at partner institution** *(in case of dual doctorate)***:** |       |
| **APPROVED DOCTORAL THESIS TITLE** |
| **Thesis language** |       |
| **Thesis title:** | *In the language of the thesis* |       |
| *In Croatian* |       |
| *In English* |       |
| **NEW DOCTORAL THESIS TITLE***(Completed only in case of doctoral thesis title change,**in which case, a new DR.01 form should be submitted together with this form.)* |
| **New doctoral thesis title:** | *In the language of the thesis* |       |
| *In Croatian* |       |
| *In English* |       |
| **APPROVED MENTOR(S)***(two mentors in case of interdisciplinary research or other reason for dual mentorship)* |
|  | **Full name, title:** | **Institution, country:** |
| **Mentor** |       |       |
| **Mentor** |       |       |
| **NEW MENTOR(S)***(Only if requesting a change of mentor)* |
|  | **Full name, title:** | **Institution, country:** |
| **Mentor** |       |       |
| **Mentor** |       |       |
| **MENTOR’S COMPETENCES** |
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| --- | --- | --- |
| **Mentor** | *List of up to five published relevant works in the past five years* |       |
| **Mentor** | *List of up to five published relevant works in the past five years* |       |

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| **COMMENT ON THE REQUEST BY PREVIOUS MENTOR OR HEAD OF STUDY PROGRAMME** |
|       |
| **DOCTORAL CANDIDATE’S REASONING FOR****THESIS TITLE CHANGE AND/OR MENTOR CHANGE** |
|       |
| **Place, date and signature** |
| In      , on       Signature      *(place and date) (full name of doctoral candidate)*  Signature       *(full name of mentor or head of study programme)* Signature       *(full name of new mentor)* |

1. Forward the completed and signed DR.06 form to the appropriate Student Office in digital and print format. The Student Office forwards the completed form to the study programme council. [↑](#footnote-ref-1)