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| --- |
| **GENERAL INFORMATION AND PERSONAL DATA OF THE CANDIDATE:** |
| **GIVEN NAME AND FAMILY NAME OF THE APPLICANT** |  |
| **Name of the study** |  |
| **Topic application for obtaining the academic title of Doctor of Science:** (please insert X in the appropriate box) | **□ within the doctoral study programme** | **□ based on the scientific achievements** |
| **Student identification number** |  |
| **Given name and family name of mother and/or father** |  |
| **Date and place of birth** |  |
| **Address** |  |
| **Telephone/mobile phone** |  |
| **e-mail** |  |
| **CANDIDATE'S CV** |
| **Education** (listed in reverse chronological order) |  |
| **List of works and active participation on conferences (Extended list to be enclosed with application)** |  |
| **TITLE OF THE PROPOSED TOPIC** |
| **Croatian** |  |
| **English (or other foreign language)** |  |
| **Language of the thesis** |  |
| **MENTOR(S)** |
|  | **Academic teaching and research title/ academic research title, GIVEN NAME AND FAMILY NAME:** | **INSTITUTION:** | **E-MAIL:** |
| **Mentor** |  |  |  |
| **Co-mentor** |  |  |  |
| **MENTOR’S COMPETENCIES – list up to 5 scholarly works in the field of doctoral thesis** |
| **Mentor – Given name and family name/****List of works** |  |
| **Co-mentor – Given name and family name/ List of works** |  |
| **TOPIC ELABORATION** |
| **Abstract in Croatian language** (max 500 characters with spaces) |  |
| **Abstract in English language** (max 500 characters with spaces) |  |
| **Introduction** (max 2000 characters with spaces) |
|  |
| **Overview of background scientific comprehensions and research** (max 5000 characters with spaces) |
|  |
| **Research goals, questions and hypotheses** (max 6500 characters with spaces) |
|  |
| **Research material, methodology and plan** (max 6500 characters with spaces) |
|  |
| **Expected scientific contribution of the proposed research** (max 500 characters with spaces) |
|  |
| **References** (max 15 references) |
|  |
| **STATEMENT OF THE CANDIDATE** |
| **I hereby declare under full responsibility that I have not submitted doctoral thesis application with an identical theme in any other university.****In Zadar, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Given name and family name** |
| **Note (optional):** |
|  |

Please name file: *PhD\_APPLICATION\_Sinop\_name\_surname of the candidate.doc*

Please, deliver the completed form *PhD\_APPLICATION\_Sinop\_name\_surname of the candidate.doc* in electronic form and in the signed printed form to the Office for Postgraduate Studies (e-mail: tajnistvopds@unizd.hr); the address for submitting the printed form is: University of Zadar, Office for Postgraduate Studies, Ruđera Bokovića 5, 23000 Zadar, Croatia).