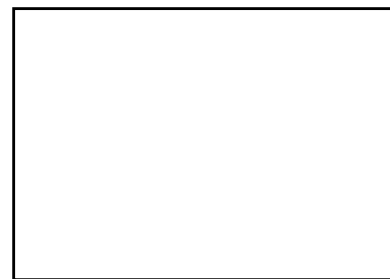


**AUTHORIZATION TO PARTICIPATE IN URV
CLASSES AS AN OBSERVER
(Open Learning programme)**



PERSONAL INFORMATION

Name:

ID card/passport no:

URV.E10.01.00

First surname:

Tel:

Second surname:

Email:

I REQUEST

To be permitted to participate as an observer in the following subject taught at the URV:

Name of the subject:

Course: : Bachelor's Master's Name of course:

Signature of the interested party

Place and date: _____, _____ 20 ____

AUTHORIZATION OF THESIS SUPERVISOR/S

I, (Full name) _____, thesis supervisor,
approve the request submitted by the interested party and authorize them to participate in the subject.

I, (Full name) _____, thesis supervisor,
approve the request submitted by the interested party and authorize them to participate in the subject.

Supervisor's signature

Supervisor's signature

Place and date: _____, _____ 20 ____

AUTHORIZATION OF THE SUBJECT TEACHER

I, (Full name) _____, teacher of the
subject, authorize the interested party to participate in the subject as an observer, in accordance with the current Academic and Registration
Regulations governing Doctoral Degrees.

Teacher's signature

Place and date: _____, _____ 20 ____

SELF-ASSESSMENT

Space where the doctoral student can give a brief description of the knowledge that they have gained from participating in this subject and how it relates to their doctoral thesis and their future research and career:

(This document (authorization request and the self-assessment) must be added to the doctoral student's activity document or DAD)