



**To fill out by a professor of a URV's doctoral programme**

DNI / NIE / Pass

Name

Surname 1

Surname 2

E-mail

Departament /  
Institute

Professor in the doctoral programme:

If the candidate is admitted in the doctoral programme, I express my support for the candidate

Name and surnames

to supervise his/her doctoral thesis doctoral in the following research line (associated to the aforementioned doctoral programme): \*

under my supervision; in witness whereof, I sign this support letter:

Signature

Date

\* Research lines associated to each doctoral programme are found in the webpage: <https://www.doctor.urv.cat/en/prospective-students/courses/>.