

APPLICATION FOR INTERNATIONAL JOINT SUPERVISION OF **THESIS**

To be completed by the thesis supervision

Please send this form + supporting documents (if applicable) only by e-mail to : doctorat@u-pec.fr

<u> I - PhD S7</u>	<u>rudent II</u>	NFORMATIC	<u>N</u>						
1- <u>Ider</u>	ntity¹_								
Student's n	umber (if alı	eady student	at UPEC) :						
Civility: N	Mrs	Mr.							
Last name :					First na	ame :			
Birth date (d	dd/mm/yyyy	'):							
Place of bir	th :								
Nationality	:								
Personal e-r	mail address	:			Person	al pho	ne nun	nber:	
2- <u>Master's degree</u> ² Title of the Master's degree authorizing enrolment in thesis:									
Place of obt	taining:								
Date of obtaining: :									
3- Other informations									
Home Unive	ersity /princ	pal institution	(during jo	oint supervi	sion re	gistra	tion):		
University/	Secondary	institution	("pilot"	institutio	n of	the	joint	supervisi	on):

 $^{^{1}}$ Attach a copy of the applicant's passport 2 Attach a copy of the diploma or attestation required for registration as a doctoral student.



II - JOINT SUPERVISION INFORMATION

1-	S	up	er	vis	sion

• Thesis	supervision	at UPEC				
Civility:	Mrs	Mr.				
Last name:		First name :				
Administra	tive rank :					
Date of obt	taining the al	oility to supervise research / or similair ability :				
Name of Re	esearch Labo	ratory :				
Email :		Phone number :				
• Thesis	supervision	in the Partner University				
Name of es	stablishment	:				
Civility:	Mrs	Mr.				
Last name:		First name :				
Administra	tive rank :					
Date of obt	taining the al	oility to supervise research / or similair ability :				
Name of Research Laboratory :						
Email :		Phone number :				
Is there a Partner Ur		greement for hosting PhD Students between UPEC and the				
YES	NO					
Does the Partner University require the establishment of a framework agreement before signing the joint supervision agreement?						
YES	NO					



2- Financial support

Is there a	n award ((or a	pending	application	for	funding)	that	will allov	v the	doctoral
student to	comple	te he	r thesis							

ΥE	S	NO						
	ease note cepted.	:_No joint supe	ervision w	ithout ded	dicated	financin	ıg seeking v	vill be
•	Scholarsh	nip/funding						
Or	igin of plan	ned funding:						
Ex	pected mor	nthly amount :				Dura	tion :	
Co	omments :							
		n the certificate obtained them.	es of obtain	ed scholar	ships / f	inancial	support if the	2 student
 	- JOINT	SUPERVISION	N PROJEC	<u> </u>				
-	Thesis titl	e						
-	Joint	supervision	added	value	to	the	research	projec
•	The docto	oral student's re al	esearch ma	y lead to a	ı patent	or requi	re special att	ention fo
ΥE	S	NO						
lf y	yes, the DR	V must be reque	ested : <u>doct</u>	orat@u-pe	ec.fr			



IV- DECISION / VALIDATION

Thesis director UPEC	Thesis director Partner university
Date :	Date :
First Name, last Name:	First Name, last Name:
Detailed opinion:	Detailed opinion:
Signature :	Signature :

Director of the Research Unit UPEC	Director of the Doctoral School UPEC
Date :	Date :
First Name, last Name:	First Name, last Name:
Detailed opinion:	Detailed opinion:
Signature :	Signature :

Joint Supervision Approval Committee To be completed by administration							
	Date :						
	Decision :						
Decision Defense Security Officer	APPROVED	NOT APPROVED	AUTHORIZATION TO RESUBMIT				
	Comments :						