***Sample form of 1st and 2nd page of Dissertation Thesis Abstract***

*1st page of Dissertation Thesis Abstract*

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STU and Faculty, if studies of the doctorate degree study programme were carried out at the Faculty

**Name and Surname**

.................................................................................................

(of the student of the doctorate degree study programme)

**Dissertation Thesis Abstract**

.......................................................................................................

(Dissertation Topics)

**to obtain the Academic Title of** .....................................................................................................

(„doktor“ („philosophiae doctor“, abbreviated as „PhD.“) or („artis doctor“, abbreviated as „ArtD.“)

**in the doctorate degree study programme:**

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(No. and Name of the study programme)

**in the field of study:**

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(No. and Name of field(s) of study)

**Form of Study:**

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(full-time or part-time study)

**guaranteed through cooperation with the university/universities:**

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**Place and Date**:.......................................................................

*2nd page of Dissertation Thesis Abstract*

**Dissertation Thesis has been prepared at:** ..................................................................................

.................................................................................................................................................

(Name of External Educational Institution, where the Dissertation Thesis has been prepared)

**Submitter:**  ...................................................................

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 ...................................................................

 ...................................................................

(Name and Surname of the Doctoral Candidate and the address of his/her workplace)

**Supervisor:** ...................................................................

 ...................................................................

 ...................................................................

**Consultants:** ...................................................................

 ...................................................................

 ...................................................................

(Name and Surname of Supervisor and Consultant, if designated, with specifying their titles and the name of the institutions, where the Supervisor respectively Consultant is employed)

**Dissertation Thesis Abstract was sent:** ........................................................

 (Date of sending)

**Dissertation Thesis Defence will be held on** ....................**at.**..............................**h** (am/pm) **at .................................................**(exact address where the dissertation thesis defence will take place)

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Rector of STU or Dean of Faculty of STU,

if studies of the doctorate degree study programme were carried out at the Faculty

(Name, Surname and titles)