Subsequent Appointment of the Mentor Group (Faculty of Agricultural Sciences)

(according to the Doctoral Regulations 2019, Sect. 6)

Name and current address of the doctoral ca	ndidate: □ Mr □ Ms
First Name and Family Name	
Address	
e-mail address	Phone number (mobile phone preferred)
2 nd Mentor	
Title First Name and Family Name	Signature of the 2nd mentor
Contact details	
e-mail address	Phone number
3 rd Mentor	
Title First Name and Family Name	Signature of the 3rd mentor
Contact details	
e-mail address	Phone number