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| |  | | --- | | **Karta przebiegu studiów doktoranckich (część I)** | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | |  | | | |  | | | | |  | | | | **Rok akad. …..../….....** | | | | | | | | | | | |
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| **Zajęcia obowiązkowe** | | | | | | | | | | | | | | | | | | | | | | | | |
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| **Nazwa przedmiotu** | **Imię i nazwisko prowadzącego** | **Semestr zimowy/letni\*\*** | | | **Ocena** | | | **Liczba**  **godzin** | | | | **Punkty ECTS** | | | | | | **Data** | | | **Czytelny podpis prowadzącego zajęcia** | | | |
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| **Zajęcia fakultatywne** | | | | | | | | | | | | | | | | | | | | | | | | |
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| \*\* wpisać właściwe | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | |  | | | |  | | | |  | | | |  | | | |  | | |  | | | | | | | | |  | | |
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Uzyskane granty (rodzaj grantu, charakter udziału w grancie, okres realizacji, kwota)** | | | | | | | | |  |  |  |  |  |  |  |  |  |  | | --- | |  |  |  | | --- | | **III. Uczestnictwo w wydarzeniach naukowych (konferencjach naukowych, sympozjach, zjazdach, wykładach gościnnych lub w innych wydarzeniach o charakterze naukowym).** |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  | | | | | | | | | |  |  |  |  |  | |  |  |  | | **IV. Data uchwały Rady Wydziału o wszczęciu przewodu doktorskiego** | | | | |  | | | | |  |  |  |  |  | |  |  |  | | **V. Stopień zaawansowania pracy doktorskiej (opis)** | | | | | | | | | |  |  |  |  |  | |  |  |  | |  |  |  |  |  | |  |  | | |  | | | | | | | | | |  |  |  | **Data i czytelny podpis opiekuna naukowego (promotora)** | | |  | | | |  |  |  |  |  | |  |  |  | | **Ogólne uwagi o zaliczeniu semestru** | | | | | | | | | |  |  |  |  |  | |  |  |  | | **Zaliczenie roku (tak/nie)\*\*** | |  | |  | |  |  |  | |  |  |  |  |  | |  |  |  | | **Skreślenie z listy uczestników studiów doktoranckich (tak/nie)\*\*** | |  | |  | |  |  |  | |  |  |  |  |  | |  |  |  | | **Inne uwagi** | | | | | | | | | |  |  |  |  |  | |  |  |  | |  | | | | | | | | | |  |  |  |  |  | |  |  |  | |  |  |  | **Data i czytelny podpis kierownika studiów doktoranckich** | | |  | | | |  |  |  |  |  | |  |  |  | | \* wpisać pełną nazwę studiów doktoranckich z podaniem formy studiów (stacjonarne lub niestacjonarne) | | | | | | | | | | \*\* wpisać właściwe |  |  |  |  | |  |  |  | | \*\*\* w tym informacja o ewentualnym zwolnieniu z obowiązku odbywania praktyk zawodowych osób zatrudnionych na stanowisku nauczyciela akademickiego | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | |  | | | |  | | | |  | | | |  | | | |  | | |  | | | | | | | | |  | | |