



Universidad de Valladolid

NOTIFICATION OF DECISION TO ABANDON THE DOCTORAL STUDIES

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| DNI, NIE or PASSPORT: |
| Surname(s), First name(s): |
| Doctoral programme: |

I hereby give notification of my wish to **abandon** my doctoral studies, for personal reasons, in the above-mentioned programme, after having informed the supervisor and director/s.

In _____, on ____ of _____ 20__

Applicant's signature,

Signed:

Signature of the programme coordinator,

Signed:

Once filled in and signed by the coordinator, this form should be sent to the administrative secretary of the Doctoral School.

Basic information concerning data protection: the details provided on this form shall be used for purposes related to the academic and administrative handling of the student's academic record. The institution responsible, the University of Valladolid, shall only release data for purposes related to said handling and within the framework defined for its competencies as set out under Organic Law 6/2001, of 21 December, governing universities. In addition, it ensures the right to access, amend, delete, transfer, limit or oppose the use thereof through the relevant guarantees and procedures with the support of a delegado.protección.datos@uva.es For detailed information regarding how your details are handled, visit the webpage: www.uva.es/protecciondedatos#informacionAdicional