# Application for change of main

*Please fill in the form (in Danish or English) and email it to* [*phd@health.sdu.dk*](mailto:phd@health.sdu.dk)*.*

| **Basic information** | |
| --- | --- |
| Name |  |
| Current main supervisor |  |
| Department | Please choose |
| New main supervisor |  |
| Department | Please choose |

| **Reason(s) for change of supervisor** | |
| --- | --- |
|  | |
|  | |
| Will your current main supervisor continue as a part of the supervisory team? | Yes  No |

| **Signatures** | |
| --- | --- |
| PhD student | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date and signature |
| Current main supervisor | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date and signature |
| New main supervisor | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date and signature |