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(name and surname of the PhD Student)

Poznań, ………………………

**Individual path of study - the academic year 2025/2026**

**Fourth Year of Education**

Director of Doctoral School of Languages and Literatures

Prof. UAM dr hab. Agnieszka Kula

Dear Professor,

I kindly ask you to approve my proposed Individual Study Path for the first year of study.

On this basis, I undertake to complete the following courses in the current academic year, in accordance with the guidelines of the framework curriculum and the curriculum for doctoral students of the Doctoral School of Languages and Literatures:

1. Optional classes

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(PhD Student’s signature)

Decision of Director:

□ I approve the *Individual path of study* for the current academic year

□ I don’t approve the *Individual path of study* for the current academic year – recommendations:

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Poznań, ……………………………………. …………………………………………………

(Director’s signature)