

ACCEPTANCE OF CO-AUTHORS DOCTORS AND NO DOCTORS



..... , with the Passport number.
with date of birth and with address in ,
street..... , no. floor ,
postal code ,city and country ,
phone number..... ,e-mail

I STATE THAT

I As a **NO DOCTOR COAUTHOR**, I am informed that Mr / Mrs.....
will apply for authorization to the **Phd Comission (comissió acadèmica del programa de doctorat en nom del programa de doctorat)** of the Universitat Autònoma de Barcelona for presenting his/her doctoral thesis as compendium of works, and I decline to use these works as a part of another doctoral thesis

II. As a **DOCTOR COAUTHOR**, I am informed that Mr/Mrs
will apply for authorization to the **Phd Comission (comissió acadèmica del programa de doctorat en nom del programa de doctorat)** of the Universitat Autònoma de Barcelona for presenting his/her doctoral thesis as a compendium of works

And, for this reason

I STATE

That accept the use of the following works (**please, list all the works where you appear as a coauthor**)

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in his/her doctoral thesis at the Universitat Autònoma de Barcelona, in the form of compendium of works

Signed

ACCEPTANCE OF CO-AUTHORS
DOCTORS AND NO DOCTORS

Bellaterra (Cerdanyola del Vallès),.....of of 20...

Comissió acadèmica del programa de doctorat en [nom del programa de doctorat](#)