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| logo polskiePoznan University of Medical Sciences | Attachment to the Communication No. 2 of the Director of the PUMS Doctoral School of September 30, 2020 |

**Doctoral School of the Poznan University of Medical Sciences**

**INDIVIDUAL RESEARCH PLAN**

Please tick: IRP submitted for the first time IRP corrected

**PERSONAL DATA**

|  |  |  |  |
| --- | --- | --- | --- |
| **PhD student** | | | |
| FIRST NAME AND LAST NAME |  | | |
| ALBUM NUMBER |  | | |
| ORGANIZATIONAL UNIT |  | | |
| RECEPTION YEAR |  | | |
| **PROMOTER** | | | |
| FIRST NAME AND LAST NAME |  | | |
| SCIENTIFIC DEGREE / TITLE |  | | |
| SCIENTIFIC DISCIPLINE / SCIENTIFIC DISCIPLINES \* (underline the correct option – bold basic discipline) | medical science | pharmaceutical science | health science |
| ORGANIZATIONAL UNIT |  | | |
| **SECOND PROMOTER / AUXILIARY PROMOTER (delete as appropriate)** | | | |
| FIRST NAME AND LAST NAME |  | | |
| SCIENTIFIC DEGREE / TITLE |  | | |
| SCIENTIFIC DISCIPLINE / SCIENTIFIC DISCIPLINES \* (underline the correct option – bold basic discipline) | medical science | pharmaceutical science | health science |
| ORGANIZATIONAL UNIT |  | | |

\* if you change the declared scientific discipline during the doctoral student's education at the doctoral school, written information on this matter should be provided as a supplement to the Individual Research Plan

**DISSERTATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| TITLE OF THE DOCTORAL DISSERTATION |  | | | |
| SCIENTIFIC DISCIPLINE (underline appropriate) | medical science | pharmaceutical science | | health science |
| THE DOCTORAL DISSERTATION WILL BE PREPARED IN THE FORM (underline the appropriate one): | series of publications | | scientific monograph (the choice of this form requires a written justification as an appendix to the Individual Research Plan) | |
| PURPOSE AND ASSUMPTIONS OF THE DISSERTATION (max. 300 words) |  | | | |
| MATERIALS AND METHODS (max. 500 words) |  | | | |
| PRELIMINARY REFERENCES |  | | | |
| PLANNED SUBMISSION DEADLINE FOR THE DISSERTATION (specify month and year) |  | | | |

**SCHEDULE FOR THE IMPLEMENTATION OF RESEARCH TASKS TO PREPARE THE DOCTORAL DISSERTATION:**

|  |  |
| --- | --- |
| **I YEAR OF DOCTORAL SCHOOL - ACADEMIC YEAR ................. / ..................** | |
| **TASK NAME** | **EXPECTED COMPLETION DATE** |
|  |  |
|  |  |
| **Ii YEAR OF DOCTORAL SCHOOL - ACADEMIC YEAR ................. / ..................** | |
| **TASK NAME** | **EXPECTED COMPLETION DATE** |
|  |  |
|  |  |
| **III YEAR OF DOCTORAL SCHOOL - ACADEMIC YEAR ................. / ..................** | |
| **TASK NAME** | **EXPECTED COMPLETION DATE** |
|  |  |
|  |  |
| **IV YEAR OF DOCTORAL SCHOOL - ACADEMIC YEAR ................. / ..................** | |
| **TASK NAME** | **EXPECTED COMPLETION DATE** |
|  |  |
|  |  |

**PLANNED EFFECTS OF RESEARCH ACTIVITY:**

|  |  |
| --- | --- |
| **I YEAR OF DOCTORAL SCHOOL - ACADEMIC YEAR ................. / ..................** | |
| **TYPE OF ACTIVITY** | **EXPECTED COMPLETION DATE** |
| **Publications:** |  |
| **Active participation in conferences:** |  |
| **Submission of a grant application:** |  |
| **Scientific internships:** |  |
| **Participation in the organization of a scientific conference:** |  |
| **Supporting the development of learning and teaching** (e.g. membership in a scientific society, foundations or commissions, supervision of a student extracurricular activity): |  |
| **Other:** |  |
| **II YEAR OF DOCTORAL SCHOOL - ACADEMIC YEAR ................. / ..................** | |
| **TYPE OF ACTIVITY** | **EXPECTED COMPLETION DATE** |
| **Publications:** |  |
| **Active participation in conferences:** |  |
| **Submission of a grant application:** |  |
| **Scientific internships:** |  |
| **Participation in the organization of a scientific conference:** |  |
| **Supporting the development of learning and teaching** (e.g. membership in a scientific society, foundations or commissions, supervision of a student extracurricular activity): |  |
| **Other:** |  |
| **III YEAR OF DOCTORAL SCHOOL - ACADEMIC YEAR ................. / ..................** | |
| **TYPE OF ACTIVITY** | **EXPECTED COMPLETION DATE** |
| **Publications:** |  |
| **Active participation in conferences:** |  |
| **Submission of a grant application:** |  |
| **Scientific internships:** |  |
| **Participation in the organization of a scientific conference:** |  |
| **Supporting the development of learning and teaching** (e.g. membership in a scientific society, foundations or commissions, supervision of a student extracurricular activity): |  |
| **Other:** |  |
| **IV YEAR OF DOCTORAL SCHOOL - ACADEMIC YEAR ................. / ..................** | |
| **TYPE OF ACTIVITY** | **EXPECTED COMPLETION DATE** |
| **Publications:** |  |
| **Active participation in conferences:** |  |
| **Submission of a grant application:** |  |
| **Scientific internships:** |  |
| **Participation in the organization of a scientific conference:** |  |
| **Supporting the development of learning and teaching** (e.g. membership in a scientific society, foundations or commissions, supervision of a student extracurricular activity): |  |
| **Other:** |  |
| **TYPE OF ACTIVITY** |  |

(If the IRP submitted is a correction of the previously submitted IRP, justification should be provided):

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……....................……………………………………………………

*(date and signature of the PhD student)*

The individual research plan was prepared in agreement with the promotor / promoters.

(delete as appropriate)

……....................………………………………………… ……....................…………………………………………

*(date and signature of the supervisor) (date and signature of the supervisor)*

If an auxiliary supervisor is appointed - opinion on IRP: positive / negative

(delete as appropriate))

……....................……………………………………………………

*(date and signature of the auxiliary supervisor)*

List of attachments:

1. .......................................................
2. .......................................................

Comments of the Director of the PUMS Doctoral School:

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**APPROVED**

……....................……………………………………………………

*(stamp and signature of the Director of the Doctoral School)*