Promotionsausschuss der WiSo-Fakultät  
Universität zu Köln  
Albertus-Magnus-Platz  
50923 Köln  
[promotion@wiso.uni-koeln.de](mailto:promotion@wiso.uni-koeln.de)

CONFIRMATION OF SUPERVISION

I hereby confirm that I will provide **secondary supervision** for the doctoral degree of

First Name Surname

I belong to the following group:

□ full-time professor of the WiSo faculty of the UzK,  
□ full-time apl. professor of the faculty or full-time private lecturer of the faculty,  
□ Junior professor of the faculty or junior group leader of the faculty.  
The request for supervisor by the doctoral committee has been approved\*.  
□ Part-time professor of the faculty   
or professor with membership legal status of a professor by the faculty or university.  
The request for supervisor by the doctoral committee has been approved\*.  
□ doctoral member of the faculty with whom a joint contractually regulated graduate program exists, or   
doctoral member of research institutions with which a joint contractually regulated graduate program exists, or  
university lecturer from other faculties or universities.  
The request of one of the individuals listed in § 6 (3) of the 2022 Doctoral Regulations has been approved by the Doctoral Committee\*.

Place, Date, Signature

Academic Title First name Surname

\* In case the request has not yet been submitted, it is to be sent informally to the doctoral committee promotion@wiso.uni-koeln.de.