

I, the undersigned
Full name corresponding promotor:
propose on behalf of all the (co)promotors appointed by the Board for Doctorates
Names of the other promotor(s) and/or copromotor(s) (exactly the same as filled in on Form A):
that in accordance with Article 12 of the Doctoral Regulations, the following persons are appointed as members of the Doctoral Committee of
$\square$

## - INDEPENDENT MEMBERS

| First independent member: |  | Online participation: | Yes $\square$ | No $\square$ |
| :---: | :---: | :---: | :---: | :---: |
| All titles, initials and name: | Prof. |  |  |  |
| (Mobile) phone number: |  |  |  |  |
| Email address: |  |  |  |  |
| University / company (country): | TU Delft |  |  |  |
| Ius promovendi (Article 12.5) | Yes (required) |  |  |  |
| Second independent member: |  | Online participation: | Yes $\square$ | No $\square$ |
| All titles, initials and name: |  |  |  |  |
| (Mobile) phone number: |  |  |  |  |
| Email address: |  |  |  |  |
| University / company (country): |  |  |  |  |
| Ius promovendi (Article 12.5) | Yes (required) |  |  |  |
| Third independent member: |  | Online participation: | Yes $\square$ | No $\square$ |
| All titles, initials and name: |  |  |  |  |
| (Mobile) phone number: |  |  |  |  |
| Email address: |  |  |  |  |
| University / company (country): |  |  |  |  |
| Ius promovendi (Article 12.5) | Yes (required) |  |  |  |
| Fourth independent member: |  | Online participation: | Yes $\square$ | No $\square$ |
| All titles, initials and name: |  |  |  |  |
| (Mobile) phone number: |  |  |  |  |
| Email address: |  |  |  |  |
| University / company (country): |  |  |  |  |
| Ius promovendi (Article 12.5) | $\square$ Yes $\quad \square$ No |  |  |  |

OPTIONAL: OTHER COMMITTEE MEMBERS


RESERVE MEMBER


| Date: | Signature: |
| :--- | :--- |
|  |  |
|  |  |

Please notify the Graduate School of any changes by email as soon as possible!

Please fill in this form and email it to the Graduate School Office as you cannot upload the form in DMA yourself.

| Volgnummer: | Datum Form C ontvangen: | Paraaf aanmelding UGS: | Opmerkingen UGS: | Paraaf akkoord namens CvP: |
| :---: | :---: | :---: | :---: | :---: |

