

Arrival date:
Dnr:

Alfred Nobels allé 7, Flemingsberg • 141 89 Huddinge • 46 08 608 40 00 • Org nr 202100–4896 • info@sh.se

# **APPLICATION FOR PART-TIME DOCTORAL EMPLOYMENT**

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| --- | --- |
| Surname, name |       |
| Swedish ID number: |       |
| Year of doctoral studies: |       |
| Area of research subject: |       |

I am applying for part-time

|  |  |
| --- | --- |
| Part-time precent % |       |
| As of date       | Until date       |
| State the reasons for the application:      |
|  |
| Signature and date of the applicant doctoral student |
| Signature |
| Name in print       | Date       |

**DESICION**

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| Approval of the director of studies/equivalent |
| Signature |
| Name in print       | Date       |

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| Approval by the Head of Division |
| Signature |
| Name in print       | Date       |

[ ]  The doctoral student's supervisor has been informed.

*Applications for part-time employment must be sent to the subject's HR generalist no later than two months before the decision on new employment.*