

Confirmation of affiliation/studies at Stockholm University

Applicant

Name:

Degree: Masters Doctoral Other

Year of degree:

Current employment/studies:

Current university/employer:

Contact person at Stockholm University:

Affiliation

Position/Title:

Department:

Fixed-term Permanent

Start date:

End date:

Research area:

The position includes a minimum of 50% research:

Yes No

This is my first my assignment at Stockholm University:

Yes No

If no, please attach your first certificate to your application.



Signature by applicant

I hereby confirm that my details above are correctly stated

Date:

Place:

Signature: _____

Signature by department at Stockholm university

I hereby confirm that all details above are correct

Head of
Department
(Prefekt)

Head of
administration

Delegated
signature rights
by Head of
Department

Date:

Place:

Signature: _____

Name: