



ISSUED IN THE REPUBLIC OF POLAND
**UNIWERSYTET MEDYCZNY
W BIAŁYMSTOKU**

(name of Unit/Units of UMB)

DIPLOMA

(full name)

born on _____ in _____

by virtue of the _____ doctoral dissertation entitled _____

and upon passing the prescribed examinations has obtained the degree of

DOCTOR

of _____ sciences in discipline _____

conferred by a resolution of the Council of the Faculty of _____
_____, Medical University of Białystok

dated _____

Supervisor/Co-supervisor in the doctoral proceedings _____

Reviewers in the doctoral proceedings: _____

Białystok,
(date)

.....
(signature of Supervisor, Co-supervisor/Dean)

mp.

.....
(signature-stamp and signature of Dean)

.....
diploma number

.....
(signature-stamp and signature of Rector)