

# Form C

## Composition of Doctoral Committee

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

Full name doctoral candidate:

Whose provisional defence date is:

### INDEPENDENT MEMBERS

First independent member:

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:

All titles, initials and name:	
(Mobile) phone number:	
Email address:	
University / company (country):	
Ius promovendi (Article 12.5)	Yes (required)

Third independent member:

All titles, initials and name:	
(Mobile) phone number:	
Email address:	
University / company (country):	
Ius promovendi (Article 12.5)	Yes (required)

Fourth independent member:

All titles, initials and name:	
(Mobile) phone number:	
Email address:	
University / company (country):	
Ius promovendi (Article 12.5)	Yes      No

**OPTIONAL: OTHER COMMITTEE MEMBERS**

First optional member:		
Independent:	Yes	No
All titles, initials and name:		
(Mobile) phone number:		
Email address:		
University / company (country):		
Ius promovendi (Article 12.5)	Yes	No

Second optional member:		
Independent:	Yes	No
All titles, initials and name:		
(Mobile) phone number:		
Email address:		
University / company (country):		
Ius promovendi (Article 12.5)	Yes	No

**RESERVE MEMBER**

MANDATORY IF the doctoral committee includes only one independent TU Delft professor (DR Article 12.7):		
Involved in doctoral candidate's research:	Yes	No
All titles, initials and name:	Prof.	
(Mobile) phone number:		
Email address:		
University / company (country)	TU Delft	

Signed on (date):	Signature:

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:	Datum behandeling in CvP:	Paraaf akkoord namens CvP: