

**Attachment No. 3 to Resolution No. 107/2023**  
**"Attachment No. 2 to the Regulation"**

Kielce, on [Date]

**CERTIFICATE OF COMPLETION OF EDUCATION AT THE DOCTORAL SCHOOL**

Mr./Ms.\* [Name]

has submitted a doctoral thesis entitled: [Title of the Thesis]

on [Date],

and has completed education at the Doctoral School, in the [Section Name] section,

in the [Discipline Name] discipline,

obtaining learning outcomes for qualification at level 8 of the Polish Qualifications Framework.

[Signature of the Director of the Doctoral School]

Received by:

1. Chairman of the Scientific Council [Name]
2. [Name/Title]