|  |  |  |
| --- | --- | --- |
| Graduate School for Cellular and Biomedical Scineces, Mittelstrasse 43, 3012 Bern | |  |
|  | | **Graduate School for Cellular and Biomedical Sciences (GCB)**  Mittelstrasse 43 3012 Bern      www.gcb.unibe.ch  **PD Dr.** Monica Schaller  Coordinator GCB  +41 31 684 53 77  monica.schaller2@unibe.ch |
|  |  |
| Bern, „add date“ |
| Statement of the co-advisor |  |

Prof./Dr. Click here to enter text. (name) asked me to act as co-advisor for the thesis of the PhD candidate **Click here to enter text.** (name)**.** The thesis project has the title**“**Click here to enter text.**”.** After having taken note of the project description, I confirm my disposition to support the candidate in his/her research project in the capacity of a co-advisor. I shall meet with the candidate at least twice a year to discuss and assess the progress of the thesis work.

The proposed project is well described and the experimental conditions seem suitable for a PhD project.

Moreover, I confirm herewith that I am available to serve as examiner for the Mid-term Evaluation and the Thesis Defence of the above-mentioned candidate.

Add your Insitutte

title first name last namer

position

**Please return to:** PD Dr. Monica Schaller, Coordinator GCB,  
University of Bern, Uni Mittelstrasse, Mittelstrasse 43, CH-3012 Bern, Switzerland  
info@gcb.unibe.ch