Header of the institution

Please, only change the highlighted sections (yellow)

City, date

To: Virginie ETIENNE

CLEAR-Doc Project Manager

Université Gustave Eiffel - Campus de Lyon

clear-doc@univ-eiffel.fr

**Letter of Recommendation of a CLEAR-Doc applicant**

Reference: CLEAR-Doc subject number CD22-XX,

 Applicant Name: Firstname LASTNAME

Dear Ms Etienne,

I, Dr. firstname LASTNAME, FUNCTION hereby confirm that I am the current / past Master’ supervisor of the Applicant.

I hereby confirm that the applicant fully possesses the capacity to undertake a PhD thesis within 3 years, in the framework of the CLEAR-Doc project (GA n° 101034248).

Please add any relevant information about skills, motivation, technical competences that would help the evaluators to assess the application. **Please do not use the applicant name and refer to him/her as “the Applicant” (please do not use “she” or “he”, only “The applicant”).**

This letter shall be communicated to the CLEAR-Doc Management Team in the CLEAR-Doc application form.

Yours faithfully,

Signature :

**First name LAST NAME**