THESIS PROJECT APPLICATION FORM

To be filled in by the student:

Name
Personal number

E-mail address:………………………………………………………………………………………………………………

Study program:………………………………………………………………………………………………………………

Number of credits of the project: ☐ 15 credits ☐ 30 credits ☐ 45 credits

Title of project:………………………………………………………………………………………………………………

The project will be carried out at Company/Department ..............................................................

during the time .............................................................. - ..............................................................

To be filled in by the supervisor:

Date, signature, name in block letters, e-mail address

To be filled in by the subject reviewer:

Date, signature, name in block letters, e-mail address

NOTE! The form is to be submitted according the instructions at www.it.uu.se/student/thesis_project/