CHALMERS

1 (2)

WORK CARD FOR DEGREE PROJECT

DEGREE PROJEKT WORKER	D	epartment work no./Se	erial no					
First name:			Last name:					
E-mail:		Pe	Personal ID-number:					
Master's Programme:			I am a feepaying or scholarship student Yes No					
				Chalmers		GU		
DEGREE PROJECT CARRIED OU	JT WITH							
First name:			Last name:					
E-mail:			Personal ID-number:					
Master's Programme:			Chalmers GU					
DEGREE PROJECT 30 Credits 6			Credit	ts				
Course code:	Starting date:			Estimated date of cor	mpletion:			
Provisional title:								
EXAMINER								
Name:			Title:					
Telephone:			E-mail:					
SUPERVISOR								
Name:			Title:					
Telephone:			E-mail:					
COMPULSORY ITEMS								
		Atten	ded m	nandatory seminars (if	required by the	masters pr	ogramme)	
Approved planning report			aminer's signature:					
Approved interim report (30 credits) in conjunction with a 60 credits degree project, submitted to the Department for reporting in Ladok.								
Examiner's signature:								
Presence at another student's degree project presentation (should be signed by the examinor of the presented project) 1								
Date:	Department:							
Title of the degree project:			Examiner's signature:					
2				I				
Date:	Department:							
Title of the degree project:	•				Examiner's sign	nature:		

Approved as opponent at the pr	esentation of another student's degree	project (should be signed by the examinor of the presented project)				
Date:	Department:					
Title of the degree project:						
		Examiner's signature:				
Approved own seminar presenti	ng degree project	I				
Opponent at the seminar (name)	:					
Opponent at the seminar (name)	:					
Date:	Examiner's signature:	Examiner's signature:				
The thesis has been approved in	plagiarism search					
Date:	Examiner's signature:					
Approved report						
Title of the degree project:						
Date:	Examiner's signature:					
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