



DIPLOMA THESIS FORM

Kind of study: **Full Time / Part Time***

Level of study: **I (bachelor) / II (master)***

Field of study:

Specialization:

Name of Student:

Student ID number:

E-mail address:

Name of Supervisor:

Name of Consultant:

Title of Diploma Thesis (new / changed)*:

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Short description of Diploma Thesis aim:

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Main tasks of Diploma Thesis:

1.
2.
3.
4.
5.

Language:

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Student signature

.....
Date of issue

.....
Supervisor signature

.....
Vice-Dean signature

*) delete as appropriate

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