## APPROVED Course Comission Scientific Council Date \_\_\_\_\_\_ Date \_\_\_\_\_\_



## $Master's \ Theme-2^{nd} \ Cycle$

## Dissertation $\square$ Project work $\square$ Professional Internship report $\square$

Name	
Identification number	_ Issued in
Address	
Mobile NumberEmail	
Master course in	
Dissertation developed in (place/organization)	
Supervisor (full name)	
Supervisor (full name)	
Date	
Student signature	
The Supervisor,	The Supervisor,