



CAMPUS DI FORLÌ
ENGINEERING DEGREES TEACHING OFFICE

APPLICATION FORM FOR MAJOR MASTER THESIS

TWO YEAR MASTER DEGREE - AEROSPACE ENGINEERING (code 8769)

Date _____ University Registration Number _____

The undersigned _____

(Last name and name)

born in _____ on _____

registered to _____ year of the course "Aerospace Engineering".

REQUESTS

to "Thesis preparation Committee" to choose "Major Master thesis".

The student declares that:

he/she has already applied for the Thesis Preparation

written report currently in preparation

written report validate on the date _____

he/she has NOT applied for the Thesis Preparation

Please, indicate your Supervisor name: Prof. _____

Topic of the Thesis

The Supervisor and the student suggest the following EXAMINER to the Committee:

Prof. _____

Supervisor _____ Student _____

(signature)

(signature)

Approved by Commission: _____ Date _____

(signature)