

R&D Project Application



R&D APPLICATION FORM Master's Program in Autonomous Systems

Project ID

A. Student information

1. Name	Anna Rose	Johny
2. Study info	Enrollment number 9038598	Started program Winter 2019
3. Contact info	Email anna.johny@mail.inf.h-brs.de	Phone number

B. Project information

1. Project duration	From 15.05.2020	To 15.01.2021	
2. Proposed topic	Title Survey on Video-based Anticipation for Anomaly Detection		
3. Supervisors	1 st supervisor's name Prof. Dr. Paul G Plöger	Date (dd. mm. yyyy) 14.5.2020	1 st supervisor's signature
	2 nd supervisor's name M.Sc. Santosh Thoduka	2 nd supervisor's affiliation HBR S	
	2 nd supervisor's email address (if external)	Date (dd. mm. yyyy) 14.05.2020	
	2 nd supervisor's post address (if external)	2 nd supervisor's signature 	
	3 rd supervisor's name	3 rd supervisor's affiliation	
	3 rd supervisor's email address (if external)	Date (dd. mm. yyyy)	
	3 rd supervisor's post address (if external)	3 rd supervisor's signature	
4. Group work	No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/>	If yes, please write your partner's name

C. Agreement

1. Candidate	Date (dd. mm. yyyy) 14.05.2020	Signature
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TO BE COMPLETED BY THE EXAMINATION BOARD

The Examination Board admits the candidate to the above R&D project with no changes the following changes

1. Topic	Title 			
2. Project duration	From (dd. mm. yyyy) 	To (dd. mm. yyyy) 		
3. Supervisors	1 st supervisor 	2 nd supervisor 	3 rd supervisor 	
	<input type="checkbox"/> Examining	<input type="checkbox"/> Not examining	<input type="checkbox"/> Examining	<input type="checkbox"/> Not examining
4. Project number	 			
5. Board signature	Date (dd. mm. yyyy) 	Signature 		