

INDIVIDUAL RELEASE FORM

Name of Depicted Person: Aditya Praveen Shidhaye

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Name of Project/Course: ML 24/25-08 Clustering documents and visualization of Embedding Vector Space

Date: 29 March 2025

I represent that I am at least eighteen years of age, am competent and have authority to execute this release.

Signature:  Date: 29 March 2025

Name: Aditya Praveen Shidhaye Email: aditya.shidhaye@stud.fra-uas.de

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