

UNIVERSITY OF PRIMORSKA,
FACULTY OF MATHEMATICS, NATURAL SCIENCES AND INFORMATION TECHNOLOGIES

APPLICATION FOR THE TOPIC OF THE DIPLOMA THESIS

TO BE COMPLETED BY THE STUDENT:

First and last name of the student: Lucas Lorenzo Jakin,

Enrolment number: 89211034,

Study programme: Computer Science, 1st Bologna cycle,

Language of study programme (*circle*): Slovene language / English language

(Working) title of the diploma thesis (DT):

Predicting Student Performance using Machine Learning

The student fills in, if they request for the approval of preparing and/or defense of the diploma thesis in a language other than the language of the study programme (if you will prepare and defend it in the language in which you are studying, it is not necessary to fill it out):

I am requesting (*circle*):

- to PREPARE the diploma thesis in Slovene / English language,
- to DEFEND the diploma thesis in Slovene / English language.

Justification:

By signing this Application I state that the diploma thesis will be exclusively the result of my own work. I am also aware that using unauthorized means and methods to produce the diploma thesis is punishable by law.

Date: 12.6.2024 Signature: _____

Mandatory attachments to this form are:

- a brief outline of the diploma thesis,
- a short presentation of the working co-mentor, if proposed for appointment.

TO BE COMPLETED BY THE PROPOSED MENTOR (the signature is obtained by the student)

Proposed mentor: Branko Kavšek

By signing this Application form I give consent to the mentorship and I confirm that the diploma thesis topic is in the field of the study programme in which the student is enrolled.

Proposed co-mentor: _____,

Proposed working co-mentor: _____,

Working co-mentor's employer: _____.

Date: 12.6.2024 Signature of the proposed mentor: _____

TO BE COMPLETED BY THE PROPOSED CO-MENTOR (the signature is obtained by the student)

By signing this Application form I give consent to the co-mentorship.

Date: _____ Signature of the proposed co-mentor: _____

By signing this Application form I give consent to the working co-mentorship.

Date: _____ Signature of the proposed working co-mentor: _____

TO BE COMPLETED BY THE COORDINATOR OF THE STUDY PROGRAMME

Coordinator: _____

Opinion about the proposed topic (circle): positive / negative

Opinion about the proposed mentor: positive / negative

(if the mentor is not employed at UP, the confirmation of the dean UP FAMNIT is necessary)

Opinion about the proposed co-mentor: positive / negative

Opinion about the proposed working co-mentor: positive / negative

Opinion about the preparation and/or presentation in another language (circle): positive / negative

Remarks:

Date: _____ Signature of the coordinator: _____