

# Form for registration of Master's thesis at Computer Science and Engineering

To be filled in by the student at the start of the work.

Must be signed by examiner and master program coordinator.

To be handed to CSEs Student Office on floor 4, room 4482, i.e. **NOT** to "studentcentrum"

### The student (to be filled in by the student)

Name				Personal	id. numb	per		
Telephone				E-mail ac	ldress			
Program and year of endorsement			Thesis p	partner				
No of credits earned in total on your program		Startii date	ng		Expe finish	ected t hed	o be	
Preliminary title:					·			
I have been informed about the publication rules for the thesis (see the master thesis homepage) and I don't mind web publication, cross here				My thesis must not be published on internet (You should have a good reason to cross here)				

## The supervisors (to be filled in by the student)

Supervisor at CSE (if other than the examiner):			
Supervisor at the company:		Name of company	
Telephone	E-mail address	·	
Examiner at CSE:			
Telephone	E-mail address		

# The thesis subject is accepted as a specialization within (This signature is handled by the student office)

Foundation of Computing		Interaction	Design	Natural Language Technology	
Networks and		Secure and		Software	
Distributed		Dependable	e	Engineering	
Systems		Computer S	Systems	and Technology	
				Software	
				Engineering	
Signature of specialization responsible:					
Clarification of signature:					

## Approving of the thesis subject by the responsible for specialization:

The thesis subject has to be accepted, not only by the examiner, but also by the responsible for a specialization or someone that he/she has appointed. If the thesis is handled by master thesis, then by the time it (and this form) reaches an examiner the thesis has been approved in the proper way. The signature that a thesis is accepted by the specialization responsible is handled by the student office i.e. these fields do not have to be filled in when you leave this form to the student office. You should mention whether you are aiming for a specialization.

### Fields below to be filled in by the Study Counselor and the Student Office at CSE

Registration for term:	Course number:	
Signature of Study counselor		
Clarification of signature:		
Form completed:	Date:	
Signature of Study administrator		
Clarification of signature:		