

Permission to write the thesis full time

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Student identification

FIRST NAME

LAST NAME

STUDENT NUMBER

NAME OF SUPERVISOR

NAME OF CO-SUPERVISOR (IF APPLICABLE)

Graduate program

Level: MSc PhD

Program: BCH CMM MIC NSC

Comments (To be completed by the supervisor or by one of the TAC members)

Signatures

SIGNATURE (STUDENT)

DATE (YYYY-MM-DD)

SIGNATURE (SUPERVISOR)

DATE (YYYY-MM-DD)

SIGNATURE (CO-SUPERVISOR)

DATE (YYYY-MM-DD)

Signatures of the thesis advisory committee members (if applicable)

NAME OF THE TAC MEMBER

SIGNATURE (TAC MEMBER)

DATE (YYYY-MM-DD)

NAME OF THE TAC MEMBER

SIGNATURE (TAC MEMBER)

DATE (YYYY-MM-DD)

NAME OF THE TAC MEMBER

SIGNATURE (TAC MEMBER)

DATE (YYYY-MM-DD)