



CA' FOSCARI UNIVERSITY OF VENICE
Department of Environmental Sciences, Informatics and Statistics
Master's Degree Course in Environmental Sciences
(LM-75 Environmental and Land Sciences and Technology, ord. DM 270/04)

REQUEST FOR THESIS PROJECT

To the Teaching Committee

SURNAME and NAME..... matr. nr.

e-mail: *Official communications should be sent to the University's email address <matriculation number>@stud.unive.it. If you wish to use only your personal mailbox then you can permanently your email from <matriculation number>@stud.unive.it **

SUPERVISOR.....

CO-SUPERVISOR (if external, please indicate his/her institution)
.....

Double/Joint Degree student

Thesis activity starting date:

THESIS TITLE.....
.....
.....
.....

THESIS WORK (experimental work or literature review)
.....

DESCRIPTION OF THE WORK TO BE CARRIED OUT: **attach a separate sheet with the description of the thesis work, arranged in sections** (to be indicated: objectives of the thesis, working method, expected experimental activity, research field, expected results).

Supervisor signature

Student signature

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Form submission date:

Teaching Committee Coordinator (or delegate)

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