# Application for Thesis Contract – Department of Electronic Systems

Type of thesis: Master’s Thesis

## Student

Name:  
Student number:  
Email:  
Programme:

## Project Supervisor(s)

Name: Signature:  
  
Name: Signature:

Collaboration with a Company (YES or NO):  
Company Contact Person (if relevant):

Name: Signature:

Email:

## Thesis

Project Title:  
Starting:  
Deadline:  
ECTS:  
If long master’s thesis please indicate courses:

## Project Description**:**

## Plan for Thesis Supervision and Lab Work:

Approved by Head of Studies:

Date: Signature:

Please return the signed contract to the study board for approval by e-mail: [inst.es.sdnvn.eit@es.aau.dk](mailto:inst.es.sdnvn.eit@es.aau.dk)