



Incoming student

- ERASMUS+
- OTHER AGREEMENT _____

Study cycle

- 1st LEVEL - BACHELOR'S THESIS
- 2nd LEVEL - MASTER THESIS

APPROVAL FOR FINAL THESIS

NAME AND SURNAME: _____ ID. _____

From (Sending Institution): _____

Contact phone: _____ E-mail: _____

Mentor at Sending Institution: _____

Mentor at TTF: _____

Zagreb, _____ 20____

Student signature:

Title of Thesis/Proposed topic:

Abstract:

Proposal of the Committee for the thesis evaluation:

1. _____, President of the Committee
2. _____, Mentor at sending institution
3. _____, Mentor at TTF
4. _____, Member



Immediate leader: _____

Number of mentorship in academic year: _____

Zagreb, _____ 20__

Mentor's signature:

On behalf of Department _____

I agree with the proposed topic and composition of the Committee for the final thesis evaluation of

student _____ from _____

_____.

Head of Department:

Zagreb, _____ 20__

Approved by Faculty Council meeting held on:

_____ 20__

Coordinator for thesis application:

Zagreb, _____ 20__

An integral part of this form is UNIZG form Approval_final_thesis_Erasmus+ student mobility for studies