

UNIVERSITY OF SZEGED
FACULTY OF PHARMACY

TIMETABLE OF THE THESIS

Student's name:.....

Subject of diploma work:.....
.....

Department:.....

Supervisor, assignment:.....

External supervisor (if it's needed), assignment, department:.....
.....

I contribute to the preparation and the defence of the Thesis with the guidance of the supervisor(s) in our Department.

.....
signature of the Head of the Department, stamp
(which announced the Thesis topics)

Date of **first consultation**:.....

Literature, methods, experiments to be performed:.....
.....
.....

Evaluation (please underline it):

1 (failed) 2 (passed) 3 (acceptable) 4 (good) 5 (very good)

.....
Signature of supervisor, stamp

Date of **second consultation**:.....

Supervisor's opinion about the student's work:.....
.....

Evaluation (please underline it):

1 (failed) 2 (passed) 3 (acceptable) 4 (good) 5 (very good)

.....
Signature of supervisor, stamp

Date of **third consultation**:.....
Supervisor's opinion about the student's work:.....
.....

Evaluation (please underline it):

1 (failed) 2 (passed) 3 (acceptable) 4 (good) 5 (very good)

.....
Signature of supervisor, stamp

Title of diploma work:.....
.....

Supervisor's signature and opinion about the diploma work:

1. it can be submitted
2. it should be completed
3. it should be re-written

Date:

.....
Signature of supervisor, stamp

The subject of diploma work can be changed only with the Dean's permission.