REGISTRATION FORM FOR DEGREE PROJECT C IN CHEMISTRY

To be submitted to coordinator Helena Grennberg at the Chemistry Education Office together with a project outline.

To be filled by the student

<table>
<thead>
<tr>
<th>Student</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Date of birth (pers code)</td>
<td>Course code</td>
</tr>
<tr>
<td>Surname</td>
<td>First name</td>
</tr>
<tr>
<td>Postal Code</td>
<td>City</td>
</tr>
<tr>
<td>Phone</td>
<td>E-mail adress</td>
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</tbody>
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* Requirements: 75 credits in Chemistry including 15 credit courses necessary for the project

Project

Registration requires a project plan approved by the department (to be submitted with this form)

| Project starts in: |  |
| Period 1 | Period 2 | Period 3 | Period 4 |
| Starting date (year/month/day) | Expected finish date (year/month/day) |

Preliminary title of the project: ___________________________

Supervisor

The undersigned hereby:

1) undertakes the responsibility to supervise this course and will otherwise contribute to the conditions necessary for the completion of this course as well as support and encourage the student to work independently to complete the tasks described both in the course syllabus and in the project plan.

2) certifies that he/she has read and will follow the terms of the syllabus relevant for the course he/she agreed to supervise.

| Supervisor |  |
| Name | Department |
| E-mail adress | Signature |
| Phone |  |

See next side--------->
Report

Report archiving options to filled in and signed by the student and the supervisor before the start of the course

DiVA***

☐ Make freely available now (open access)

☐ Make freely available later Date****

☐ Secrecy Registration number

Student’s signature Supervisor’s signature

*** DiVA – Academic Archive Online – is Uppsala University’s system for electronic archiving and/or publishing for papers and theses produced by researchers, teachers and students.

**** Maximal delay: 2 years from the date the thesis is uploaded in DiVA

To be filled by the coordinator

Subject specialist

Name Department

E-mail adress Signature Phone

Examiner

Name Department

E-mail adress Signature Phone

Registration in Uppdok Report approved
Oral presentation DIVA serie number
Opposition FINAL APPROVAL