……………………………………….. Wrocław, ……………………. (date)

First name and surname

Degree programme Specialisation Grade book no.

# postponement of the time limit for thesis submission

Dean of the Faculty of Electronics of Wrocław University of Science and Technology

I kindly request your permission to postpone the time limit for the submission of my thesis until:

…………………………., for the reason (\*)……………………………………… + annexe Subject……………………………………………………………………………………………………………..…………………………………………………………………………………………………………………Thesis supervisor: ………………………………………………………………………………………………………..

**I hereby undertake to submit a “declaration of fulfilment of the full curriculum of the degree programme” at the Dean’s Office within 3 days of the day of receiving a positive grade for my Thesis.**

**I also undertake to submit the documents to the Secretaries of the Thesis Examination Commission within 5 days (of the day of receiving an e-mail message informing me of the completion of the clearing process).**

Possibilities of postponing the day of thesis submission:

Possibility I

* 1. illness
  2. extended stay abroad under a cooperation agreement or Erasmus programme
  3. failure of a research/test stand
  4. force majeure Possibility II

II due to considerable time constraints, he/she has not performed complete research or failed to write/edit the thesis.

# Confirmation of the candidate’s activities:

Proposed date of thesis submission ………………………………………

…………………………………………………………………………………….

Thesis supervisor’s n first name, surname, and signature

**Specialisation supervisor’s opinion:**

………………………. student’s signature

# PLEASE NOTE:

In the gap marked (\*), please enter I.1 or I.2, or I.3, or I.4, or II. In any case, a relevant document must be attached:

* 1. – medical leave specifying the length of the indisposition (number of days)
  2. – document confirming the student’s say abroad in a specific time-frame of the semester
  3. – specific time for which the research/test stand was unavailable, confirmed by relevant personnel, e.g. head of laboratory
  4. – document confirming the force majeure

II – legibly written justification written and signed by the student (a few sentences)

# DEAN

…………………………………………………………………………………… Specialisation supervisor’s n first name, surname, and signature

**Secretary of the Thesis Examination Commission:**

I don’t grant my permission I grant my permission for postponing the date until ………………………

I confirm that the student’s thesis examination will take place on ...................................

………………………………………………………………… Secretary’s n first name, surname, and signature

………………………………