



Application for study plan agreement for the master programme

This agreement is an agreement between student, supervisor(s) and Programme Board concerning mutual rights and duties regarding the completion and curriculum of the master degree.

The form must be filled in co-operation with supervisor(s) (or contact person) and submitted to the Programme Board in the first semester for approval. Deadline **15th of May** or **15th of November**.

1. PERSONAL INFORMATION

Surname, Forename:		Identity number (11 digits):												
Telephone number:		E-mail address:												
I'm a student at the master programme in IT og Ledelse														

2. MASTER THESIS

A brief description of the thesis, scope, problematic issues, provisional title, methods that it is intended to apply and a progress plan showing important stages shall be enclosed with the application on a separate sheet.

Thesis (30 ECTS):

Will the thesis be part of a work done by more than one student? (If Yes, you must enclose an agreement on this cooperation stating how the work will be divided between you.)

Yes:

No:

3. SUPERVISOR AND SUPERVISION (or contact person if you have not yet found a supervisor)

Name of supervisor:	Office address, telephone, e-mail, post held:	Supervisor's function (<i>indicate letter</i>):	
		M = Main supervisor C = Co-supervisor	I = Internal E = External
Contact person: (only if you don't have a supervisor)			
For any supervisor(s) not employed by the Faculty of Mathematics and Natural Sciences, a brief presentation is to be given here of his/her/their qualifications as supervisor(s) for the thesis:			
If the main supervisor is external or temporarily employed, state the internal supervisor the Programme Board has appointed as responsible:			
Information about any times during the period of the Agreement when the supervisor(s) is/are not available:			
How will supervision be ensured during this/these period(s)			

4. PLACE OF WORK AND NEEDS FOR RESOURCES

The thesis work will be performed in the following place (department, section etc.):			
The student's place of work will be (room and telephone number):			
Are necessary equipment, normal operating funds and other resources available? (If <u>No</u> , give grounds and comments on a separate sheet. If there is a need for other operating materials, specify this on a separate sheet.)	Yes:	No:	
Has the department approved the anticipated use of resources?	Yes:	No:	
Is this expected to exceed normal use of resources?	Yes:	No:	

5. BINDING SIGNATURES

Student and supervisor are in agreement on items 2-8. If external or temporarily employed supervisor, then also internal responsible supervisor –. It is the responsibility of both the supervisor and the student that the plan is followed, both in terms of content and progress.

Student and supervisor must familiarise themselves with the rules and guidelines currently in force for supervision, implementation, copyright and other matters relating to the master degree programme.

	Date:	Signature:
Student:		
All supervisors:		

All enclosures:

To be completed by the Programme Board. May be replaced by a letter of approval to the student.

6. APPROVAL OF PLAN FOR THE MASTER DEGREE PROGRAMME

_____ (state master degree)
_____ (state programme options, if any)
_____ (state field, if any)
is approved with any amendments/comments that are indicated below.
Any amendments/comments to the plan submitted:

Blindern:

Signature Date

Copy of the Agreement is to be sent to student and supervisors.