UNIVERSITY OF OSLO

**The Programme Council for the Bachelor’s and Master’s Degrees in Chemistry**

Sem Sælands vei 26

P.O. Box 1033, Blindern

N-0315 Oslo

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**APPLICATION FOR APPROVAL OF STUDY PLAN FOR THE MASTER’S DEGREE STUDY / AGREEMENT UP TO FINAL EXAMINATION**

***This agreement is a cooperation agreement between student, supervisor(s) (or contact person, if relevant) and the programme council concerning mutual rights and duties in connection with the plan for the Master’s degree study. The agreement consists of a form and such enclosures as shall be submitted for the purposes of approval.***

***The form shall be filled out after admission to the Master’s programme. The plan is to be filled out by the student in co-operation with supervisor(s) (or with contact person, if relevant) and submitted to the programme council for approval.***

1. **PERSONAL INFORMATION**

Versjon 24.3.2011

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| Surname, Forename: | | Identity number *(11 digits)*: |  |  |  |  |  |  |  |  |  |  |  |
| Telephone number: | E-mail address: | | | | | | | | | | | | |

Section 2/Contact person is to be filled out only if a supervisor has not been appointed for the student by 15 September/15 February (for the autumn and spring semester, respectively), and then only page 1 of the study plan should be submitted by the mentioned dates. In such cases the contact person will normally be the head of academic affairs at The Department of Chemistry until an agreement has been made with a supervisor. Students without a supervisor must set up a plan together with the contact person regarding choice of courses for the first semester of their period of study. The final deadline for appointing a supervisor and for submitting a complete study plan is 15 November/15 May (autumn/spring).

The deadline for submitting a complete study plan is 15 September/15 February for all students who have made an agreement with a supervisor before this deadline. In such cases section 2/Contact person does not have to be filled out.

1. **CONTACT PERSON (UNTIL SUPERVISOR IS APPOINTED):**

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| Surname, Forename: | | Place: |
| Telephone number: | E-mail address: | |
| Assigned for what period: | | |

**3. THEORETICAL CURRICULUM**

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| Curriculum (state course codes and names). Special curriculum must be specified in a separate enclosure signed by the principal supervisor. A maximum of 25 credits may be included with Pass/Fail grading, and an application must be submitted to The Programme Council for the Bachelor’s and Master’s Degrees in Chemistry if this limit is to be exceeded. | Credits (ECTS): | Grading: A-F or Pass/Fail |
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**4. OTHER THEORETICAL CURRICULUM IN THE MASTER’S DEGREE**

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| State course code/activities unrelated to science subjects/inter-faculty provision/training in methods/etc. | Credits (ECTS): | Grading: A-F or Pass/Fail |
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**5. ANY REMAINING COURSES FROM THE FOUNDATION FOR THE MASTER’S DEGREE**

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| Specify those courses that remain for the completion of a Bachelor’s degree or the equivalent, and any courses that remain from the academic foundation for the Master’s degree study | Credits (ECTS): | Grading: A-F or Pass/Fail |
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**6. MASTER’S THESIS**

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| *A brief description of the purpose 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.* | | | | |
| *A risk assessment in connection with planned activities during work on the Master’s thesis, as well as the use of chemicals, must be enclosed with the study plan on a separate form which can be downloaded from:*  [*www.mn.uio.no/kjemi/om/hms/skjema/risikovurdering-av-masteroppgave.odt*](http://www.mn.uio.no/kjemi/om/hms/skjema/risikovurdering-av-masteroppgave.odt) | | | | |
| Will the dissertation form part of a piece of joint work done by more than one student? *(If* Yes, *an account is to be enclosed of the joint work, see “Rules for the Use of Joint Work in Examinations”)* | Yes: |  | No: |  |

**7. PROGRESS PLAN FOR THE MASTER’S DEGREE STUDY**

***Specify for each semester the amount of work in terms of credits that it is planned to carry out***

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| Year/semester  *(chronologically)*: | Remaining courses from the Bachelor’s degree, uncompleted academic requirements for the Master’s degree study, credits for the syllabus in the theory of the subject, other content of the Master’s degree and dissertation. The number of credits is to be specified for each element. The sum shall be 30 credits per semester in the case of full-time study, and otherwise be adapted to any agreement entered into concerning part-time study or leave. Such agreements, which are to be applied for separately, shall be enclosed with this form. | Sum credits |
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| ***Ordinary submission date for the Master’s degree thesis is 15 May/15 November.***  ***Attention is drawn to the fact that it is the student’s responsibility to ensure that all requirements for the Bachelor’s degree or for the equivalent foundation for the Master’s degree are satisfied no later than the semester before the final examination. This also covers all academic requirements that are part of the foundation for the Master’s degree, including previous knowledge requirements for courses in this foundation. The final examination will not be held until the student has satisfied all the requirements.*** | |  |

**8. SUPERVISOR(S) AND SUPERVISION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of supervisor: | Office address, telephone, e-mail, post held: | | | Supervisor’s function (*indicate letter*): | |
| P = Principal supervisor  C = Co-supervisor | I = Internal  E = External |
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| 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 dissertation: | | | | | |
| If the principal supervisor is external or temporarily employed, state here the internal supervisor the programme council 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) |  | | | | |

**9. PLACE OF WORK AND NEEDS FOR RESOURCES**

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| The research task will be performed in the following place (department, section etc.): | |  | | | | |
| The student’s place of work will be (room and telephone number): |  | | | | | |
| Are necessary apparatus, equipment, normal operating funds and other resources available? (*If* No, *give grounds and comments on a separate sheet. If there is a need for other operating materials, such as:*  *, specify on a separate sheet.* | | | Yes: |  | No: |  |
| Has the unit where the work on the Master’s degree dissertation shall be carried out approved the anticipated use of resources? | | | Yes: |  | No: |  |
| Is this expected to exceed normal use of resources? | | | Yes: |  | No: |  |

**10. BINDING SIGNATURES**

***Student and supervisor – if external or temporarily employed supervisor, then also internal responsible supervisor – are in agreement on items 3-9. 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’s degree study.***

***The student confirms by signing this agreement that he/she has been informed about security regulations at The Department of Chemistry and pledges not to start any activity in the department’s laboratories or otherwise which may endanger the department’s work environment or equipment without explicit consent by their supervisor or person in charge.***

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|  | Date: | Signature: |
| Student: |  |  |
| All supervisors: |  |  |
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| **ENCLOSURES (all enclosures must be signed by both student and supervisor/s)** | Enclosed  (cross off) |
| **Project description for the Master’s thesis *(MUST BE INCLUDED)*** |  |
| **Risk assessment for the Master’s thesis *(MUST BE INCLUDED)*** |  |
| **Application for part-time studies, including work contract (if relevant)** |  |
| **Any appendices concerning resources/operating funds** |  |
| **Special curriculum (if relevant)** |  |
| **Other enclosures:** | |

**11. APPROVAL OF PLAN FOR THE MASTER’S DEGREE STUDY**

***To be completed by the programme council. May be replaced by an e-mail of approval to the student and principal supervisor where the final deadline for submitting the Master’s thesis is specified.***

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| **DECISION:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (state subject area, if relevant)  is approved with any amendments/comments that are indicated below.** |
| ***Any amendments to/comments on the plan submitted:*** |

Blindern…………………………………………………………………………………………………………………… Date Department signature