



**(To be completed ONLY upon acceptance of supervision by supervisor)**

Academic year:

Student name:

ID card #:

E-Mail:

Project title:

  

Supervisor name (and co-supervisor, if applicable – write supervisor name first):

**NOTE:** This form must reach the Department's Administrator via email on [elton.mamo@um.edu.mt](mailto:elton.mamo@um.edu.mt).

By signing this form, the above-mentioned supervisor/s affirms his/her/their intention to supervise the above-mentioned student. The student confirms that in the case of acceptance by the Board of Studies, his/her decision to be supervised by the indicated supervisor is final.

**Signed:**

\_\_\_\_\_  
*Supervisor*

\_\_\_\_\_  
*Student*

\_\_\_\_\_  
*Co-supervisor (if applicable)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Date (if applicable)*

Project Proposal (Word Limit – 500 words):

*In the case where the student is applying for a dissertation which was proposed by the supervisor, the student may print and attach the supervisor's project description to this form.*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.