

CERTIFICATE OF RECEIPT OF THE SUBJECT OF DIPLOMA THESIS

STUDENT'S NAME AND SURNAME

NUMBER OF ALBUM.....

TYPE OF STUDIES full-time / part-time *

1st degree / 2nd degree *

FIELD OF

STUDY.....

SUBJECT OF DIPLOMA THESIS

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DIPLOMA THESIS PROMOTER

Poznań, on

.....
PROMOTOR SIGNATURE

.....
STUDENT SIGNATURE

* delete as appropriate
A copy for the student

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