



TITLE OF THE MASTER DISSERTATION
Master of Science in Maritime Science

Academic year 2024-2025

STUDENT:

SUPERVISOR:

Student number:

Name: Name:

Address:

Phone number:

TITLE

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The supervisor accepts his role if the subject, title and/or agreed structure of the master dissertation is not significantly changed by the student, without express consent of the supervisor.

Signature student

Signature supervisor

Date

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