Kenmerk: EWI23/BOZ/10892/MvdK 

# Faculty of EEMCS

**Electrical Engineering, Mathematics and Computer Science**

**Bachelor programme Applied Mathematics**

## Registration Form Bachelor’s Final Examination

The undersigned student of the faculty of EEMCS hereby registers themselves for the bachelor exam Applied Mathematics.

|  |  |
| --- | --- |
| Student number  |   |
| Last Name  |   |
| First Names  |   |
| Date of Birth  |   |
| Place of Birth  |   |
| Address  |   |
| Postal code  |   |
| Place  |   |
| Telephone  |   |
| Title B-assignment   |   |

The following study units have not been completed or finalised:

|  |
| --- |
| **Courses to be completed or finalised** |
| Course code:  | Course name:  |
|    |   |
|    |   |

According to the pass/fail regulation (see the B-EER), you may have no more than one grade of 5.0 for the (AM) study units of the first year of the Bachelor’s curriculum (AM and AM-TCS) and no more than one grade of 5.0 for the study units of the second and third years combined (AM). If you wish to apply this, then mention these courses here:

|  |
| --- |
| **Courses with a grade of 5.0** |
| Course code:  | Course name:  |
|    |   |
|    |   |

(This form continues on page 2.)

I will/will not\* attend the graduation ceremony.

I will/will not\* attend the reception.

I want/do not want\* to be eligible for a final degree audit with distinction.

\*) remove what is not applicable

I □ will continue my studies with the Master’s programme in AM with specialization:

###  Ο SACS Ο OR Ο Mathematics of Data Science

 □ will continue my studies with the UT Master’s programme in: …………………………...…

 □ did not decide yet how to continue my studies,

 □ will stop my studies at the UT.

Date: ………………………………. Signature:………………………………….

Send your registration form to BOZ-AM via email (boz-am@utwente.nl).