

**Registering Master’s diploma**

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**Industrial Design Engineering**

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| --- | --- |
| Name and first name |  |
| Student number |  |
| Address |  |
| Postal code - City |  |
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| hereby registers for issuing of the Master’s degree in Industrial Design Engineering, which (provided that all applicable requirements are met) will take place following the colloquium on: | |
| **I make sure that this completed and signed form and the colloquium announcement is handed in at BOZ four weeks (20 working days) before the colloquium date** and I email the graduation report in pdf format to BOZ-IDE, or hand it in by means of a USB stick, one week in advance. | |
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| Having regard and agreed to the above,   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature student |

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| **TO BE FILLED OUT BY BOZ-IDE**   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Personal data |  | Course grades |  | |  | | --- | | Date graduation: | | | BA graduated |  | Colloquium announcement |  | | Master’s courses |  | Graduation committee |  | | Minimum 120 EC |  | Exam grades |  | |  |  | Signatures |  | | M report.:  received       confidential    public | | | | | Registration CSA:  email   final | | | | Date received.: | |

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