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| --- | --- |
| Course code and name | Choose an item. |
| Student number | Enter text here. |
| Last Name | Enter text here. |
| First Name | Enter text here. |
| Examiner/supervisor | Enter text here. |
| Research group / specialisation | Choose an item. |

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| --- |
| **Assessment by the lecturer/examiner** |
| **Grade**: |
|  |
| **Motivation:**  (Please comment on the achieved level of the knowledge the student acquired.The depth of this knowledge and competences should be such that the student can use it in an independent way for research and development purposes in one of the fields of Electrical Engineering, e.g. during the master’s thesis.) |

**Assessment date (dd/mm/yy):**

**Signature of the examiner**

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