U N I K A S S E L V E R S I T 'A' T

Institute for Economics

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Contact Sheet: Bachelor or Master Thesis

Name	
Address	
Phone Number	
Email address	
Course of studies	
Matriculation number	
Number of semesters	
Desired start of thesis preparation	

Filled in by the department	
Title of the thesis:	
Examiners:	
Supervisor:	
Duration:	
Submission date:	
Date of defense:	