

FACULTY OF ELECTRICAL ENGINEERING

MASTER'S THESIS

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.....
(title of the thesis)

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.....
(tytuł pracy w j. polskim)

Student:
Supervisor:
Consultant:

Faculty of Electrical Engineering
Form of study: *full-time*
Field of study: *Master of Science in Electrical Engineering*
Specialization:

1. Aim and scope of the thesis:

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2. Stages of the thesis:

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3. Commencement date:

4. Completion due date:

5. References:

- [1]
- [2]
- [3]
- [4]

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Supervisor's signature

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*Stamp and signature of
Department Coordinator for Education*