



Fill in and submit to: Felix.busque@uab.cat

STUDENT INFORMATION

NAME AND SURNAME:	
DNI :	DATE OF BIRTH:
PHONE:	ACTIVE E-MAIL:
ADDRESS	

MASTER INFORMATION

Specialization: Choose one:	Industrial Chemistry		Advanced Chemical Research	
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If you are enrolled in the specialization "Industrial Chemistry", please fill the following questions

In which area of chemistry are you more interested?

Do you have your own vehicle to access to the company?

If you are enrolled in the specialization "advanced Chemical Research", please fill the following questions

Do you have a research group to perform the master Thesis?

Supervisor name:

Supervisor e-mail:

Place:

Have you applied for admission to other Master's programme (in the UAB or other High Education Institution)?

Yes ____ or not ____

If yes, specify the name of the master's programme and the organizing institution:

Date