

GRADUATE SCHOOL • EINDHOVEN UNIVERSITY OF TECHNOLOGY

HTI - REQUEST FOR AN EXTENSION OF THE MASTER THESIS PROJECT DEPARTMENT OF INDUSTRIAL ENGINEERING & INNOVATION SCIENCES

Personal Informatio	n		
Name:			
Address:			
Postal code / city:			
Phone:			
Student Number:			
MSc Program:	MSc Innovation Sciences (IS) MSc Human Technology Interaction (HTI)		
Project Information			
First Supervisor:		C	Group:
Second Assessor:		C	Group:
Company: Company Supervisor: Department: Address: Postal Code / City: Phone:	nducted in a company, please fill in the following info		
Report Details Title Thesis Report: preliminary			
Project Start Date:			
Originally Planned			
Project End Date:			
Requested End Date (After Extension)*:			

Proceed to the next page.

^{*}The end date can be no later than 7 months after the start date of the master thesis.



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With this form, I request an extension of my Master Thesis Project for up to two months.				
Reason for the delay:				
Measures that the student will take to ensure that the pro	ect can be finished within the period of extension:			
Confirmation (Student and Supervisor)				
Confirmation (Student and Supervisor) Student	First Supervisor			
Date	First Supervisor Date			
Signature	Signature			
Exam Committee				
Exam Committee				
Approved	Rejected			
Date				
Signature				
Comments				
Comments (If applicable)				