

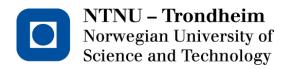
Faculty of Information Technology and Electrical Engineering

APPLICATION FOR ASSESSMENT OF DR. PHILOS THESIS

Cf. Section 5 in the Regulations concerning the doctor philosophiae degree, dr. philos, at NTNU Name of candidate Date of birth (DD.MM.YYYY) Department Postal and email address (for letters, PhD Certificate etc. after completion): Postal address E-mail address (private) I hereby apply to the Faculty of Information Technology and Electrical Engineering to have the following dr.philos thesis assessed: Title of thesis Type of thesis (please check the relevant box): Compendium of several shorter scientific or academic papers ☐ Monograph I hereby declare that: (Check the boxes and strikethrough the option in italics that do not apply to this application) ☐ The thesis prepared is in the approved format and in accordance with NTNU's rules, and with the number of copies stipulated by the Faculty; Declaration(s) from co-author(s) are required and enclosed, cf. Section 3; ☐ The doctoral work is being submitted for assessment for the *first/second* time; ☐ The doctoral work has not been submitted for assessment at another institution; Documentation(s) of required permission is enclosed, cf. Section 5. (i.e. details of any restrictions related to intellectual property rights, to protect the rights of others; description of any legal or ethical issues raised by the project, e.g. dealing with personal information. Check the box if relevant permission should be enclosed, or leave the box unchecked if no permissions were needed).

Date

Signature of candidate



Faculty of Information Technology and Electrical Engineering

To be completed by the Department:

(Please strikethrough the option in italics that do not apply to this application)

Recommended/Not recommended by main internal committee: ☐ Statement from internal committee is enclosed concerning the standard of scientific quality of the thesis in respect to the dr. philos Degree, cf. Section 5.	
Received at the department:	
Date	Signature by the Department
The Department recommends	that the application is accepted/rejected

This form is to be attached the Departments' proposal for the evaluation committee addressed to the Faculty.

Signature of Head of Department

Enclosures:

Date

- 1 copy of the draft thesis preferable electronically or in print
- Diplomas and transcripts
- Declaration(s) from co-author(s)
- Statement from internal committee
- Documentation of required permission(s) (if relevant)