………………………………….. Wrocław, day………………..……….

(name and surname)

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(student’s ID number)

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(year of study/ level)

…………………………………..

(field of study/speciality)

**Dean of the Faculty of**

**Electronics, Photonics and Microsystems**

**Wrocław University of Science and Technology**

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| **Student report on the progress of the Diploma Dissertation:** | |
|  | |
|  | ……………………………………  (date and signature of student) |
| **Opinion of the dissertation supervisor:** | |
|  | |
| Progress (in percents): ………% (**mandatory!**) | |
|  | …………………………………………  (date and signature of supervisor) |