**University of South Bohemia in České Budějovice**

**Faculty of Science**

**Application Form for Defence of MASTER Thesis**

**and MASTER State Examination**

**Applicant’s name**:…………………………………………………………………………………........

**Date and place of birth**:……………………………………………………………………………........

**Phone, e-mail:**............................................................................................................................................

I hereby apply to defend my Master thesis with the title ...........................................................................

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I agree with the publication of my Master thesis on the website of the University of South Bohemia in České Budějovice.

I hereby apply to take the Master state examination -

field of study..........................................................................................

specialization..........................................................................................;

in the following subjects: 1. .................................................................

 2. .................................................................

 3. .................................................................

In České Budějovice....................................................

Signature:.............................................