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**WORKING LIFE REPRESENTATIVE’S STATEMENT ON THESIS/DEVELOPMENT PROJECT**

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| --- |
| Organisation/company and contact information  |
| Thesis/ development project author(s)  |
| Degree programme/option  |
| Thesis/development project title  |
| Supervising teacher and contact information (address, telephone, email)  |

|  |
| --- |
| Achievement of objectives set in the thesis contract/permit  |
| Exploitability of results in the company or organisation  |
| Reporting of results, conclusions and discussion  |
| Student’s responsibility, time management and cooperation skills  |

28.8.2019

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Other considerations, special merits

**WORKING LIFE REPRESENTATIVE’S STATEMENT ON THESIS/DEVELOPMENT PROJECT**

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Date Working life representative’s signature and clarification of signature

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Date Working life representative’s signature and clarification of signature The form is to be returned to the supervising teacher. **Thank you for cooperation!**

28.8.2019