

**University of South Bohemia in České Budějovice  
Faculty of Science**

**ASSIGNMENT OF MASTER THESIS**

**Student** (*first name, last/family name, titles*): .....

**Study programme:** .....

**Department:** .....

**Supervisor:** (*first name, last/family name, titles*): .....

**Co-supervisor:** (*first name, last/family name, titles*):.....

**Master thesis topics:** .....

.....

**Aims of the thesis:**

Recommended literature:

Financial sources:.....

Signature of the Supervisor: .....

Signature of the Co-Supervisor: .....

Signature of the Head of the Department where the experiments are to be carried out:

.....

Signature of the Study Programme Supervisor: .....

Signature of the Director of the Institute of the ASCR (in the case that the experiments are to be performed at an institute of ASCR): .....

In České Budějovice on .....

Signature of the Student: .....