Zielona Góra, ………………………………………

 (date of diploma examination)

**DECLARATION**

I hereby give consent/ do not give consent\* (delete as appropriate) for the thesis, retained in student files, of my student

………………………………………………………………………………………………………………………………….

surname and name of the student (in capital letters)

on

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

to be made available to other scholars.

…………………………………………

Supervisor’s signature