



# DEPARTMENT OF PHYSICS

## EVALUATION OF THE PROJECT SPH.04003

### **Master student**

Name, first name :

e-mail :

### **Supervisor**

Name, first name :

### **Project**

Starting date :

Title :

Abstract :

### **Evaluation (5 ECTS)**

Originality :

Understanding of the problem :

Amount of work :

Independence :

Quality of the report :

Remark :

Date :

Signature of the supervisor : .....

**Once completed and signed, to be transmitted to Anne Fessler, office 1.54. Thanks!**