



INTERNATIONAL UNIVERSITY OF SARAJEVO
INTERNACIONALNI UNIVERZITET U SARAJEVU

Graduate Studies Scientific Activity Approval Form

Part I Student Information

Student Name and Surname	Student Number	Study Program	Signature
			Date [...../...../.....]
Last academic year/semester registered	20 <input type="checkbox"/> / 20 <input type="checkbox"/>	<input type="checkbox"/> Fall <input type="checkbox"/> Spring	

Part II Information about Completed Scientific Activity (Please mark the type of Scientific Activity)

- Publication of journal paper
 Publication of conference paper
 Other*

Title of paper	
Author(s)	
Publication information	
ECTS credits awarded	

Part III Approval of Scientific Activity (For Official Use Only)

	Name and surname	Signature	Date
Mentor			

*Other (please specify) Attach report	
ECTS credits awarded	
Supervisory Committee	Committee member.....Signature
	Committee member.....Signature
	Committee member.....Signature

		Session date
Approval of the Faculty Council	Approved <input type="checkbox"/> Disapproved <input type="checkbox"/>	