MINISTERUL EDUCAȚIEI
UNIVERSITATEA TEHNICĂ DIN CLUJ-NAPOCA

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FACULTATEA DE construcții CLUJ NAPOCA

REGISTRATION

for the diploma/dissertation project 2024-2025

Student's Last Name	
Student's First Name	
Father's First Name	
CNP/ Personal identification number	
Field of Study	
Specialization	
Year	
Group	
Title of the Graduation / Dissertation Project	_____ _____ _____
Academic Supervisor	1.
	2.

By signing this registration file, I accept that:

- Registration files will be sent by email to: ***secretariat.constructii@staff.utcluj.ro***
- Deadline for submitting the signed request: January 20, 2025.

Date: ___/___/_____

Academic supervisor signature:

1. _____

2. _____

Student signature:

_____