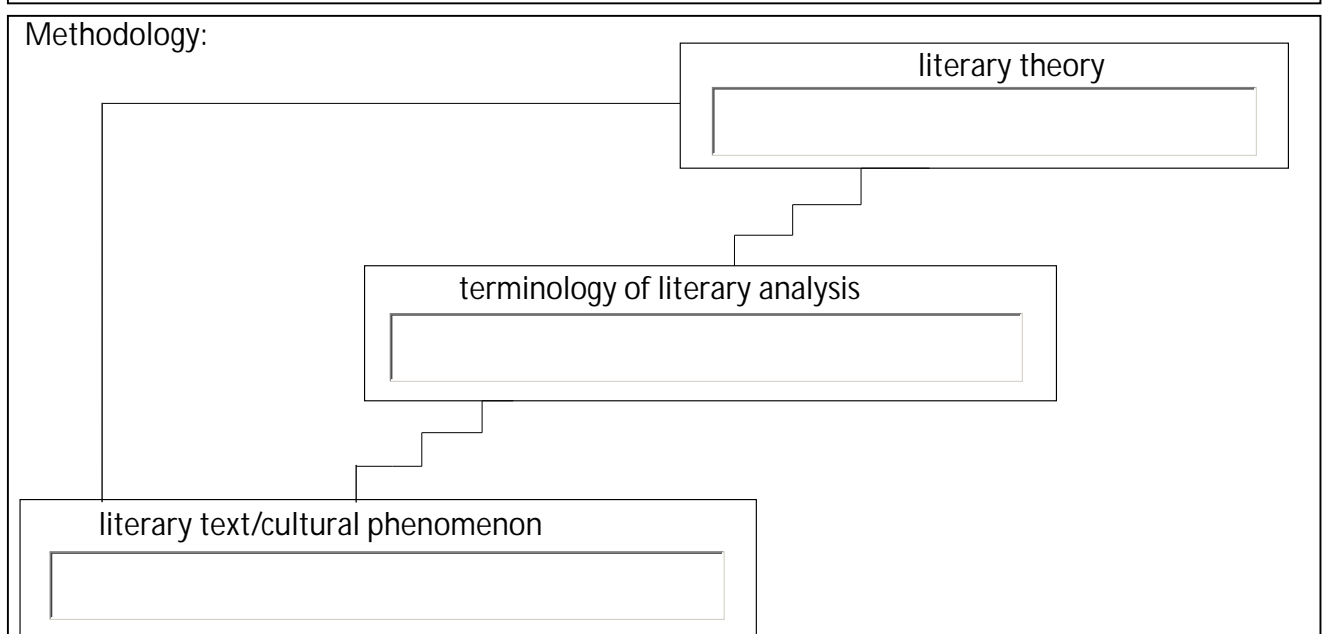


# Coursework Consultation

Name:	Student no.:	Degree course/Semester:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Class/Module: <input type="text"/>		
Lecturer: <input type="text"/>		

Title:

Thesis statement:



Essay structure:

Further Notes/Questions:

<input type="checkbox"/>	tentative title and thesis statement accepted, registration for office hour:
<input type="checkbox"/>	OR further coursework consultation:
date, signature:	