



**ACADEMIA DE STUDII ECONOMICE DIN BUCUREȘTI**  
**FACULTATEA CONTABILITATE ȘI INFORMATICĂ DE GESTIUNE**

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Approved,  
 Head of department

**DEAR MR DIRECTOR,**

I, *(name and surname in full)* \_\_\_\_\_,  
 phone number \_\_\_\_\_, e-mail \_\_\_\_\_,  
 birth date \_\_\_\_\_, Personal Identification Number (CNP) \_\_\_\_\_,  
 student enrolled in **Accounting and Management Information Systems Faculty, Accounting, Audit  
 Management Information Systems master program**, full time, group \_\_\_\_\_, cohort  
 \_\_\_\_\_ (OR for previous cohorts, please write: starting year \_\_\_\_ and ending year \_\_\_\_),  
 please approve my Dissertation Thesis title for defense in the academic year **2023-2024, July 3<sup>rd</sup> -5<sup>th</sup>** :

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Date:** \_\_\_\_\_

**Student signature** \_\_\_\_\_

**Coordinating professor** \_\_\_\_\_

(the signature is not required if you have agreed to collaborate)

**Office assistant signature** \_\_\_\_\_

*Remark. In case you do not mention the coordinating professor, you will be assign to according to your title written above.*

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