Appendix 3

COVER LETTER for participation in

**ХХХ INTERNATIONAL REVIEW-COMPETITION OF DIPLOMA THESES IN ARCHITECTURAL AND URBAN PLANNING, DESIGN AND ART SPECIALTIES**

graduates of architectural, design and artistic specialties

of higher education institutions

**Bachelor's / Master's** qualification level

*indicate the qualification level according to the list provided*

specialty G17 Architecture and Urban Planning

*indicate specialty*

Name of the higher education institution \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Institute (faculty) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| № | Full name of the author | Full name of supervisor*(position, academic degree and academic title)* | **Title****of diploma projects** | Qualification level **\*** (Bachelor / Master) | **Nominations\*\*** |  |
| **Public buildings 1**(rehabilitation and medical) | **Public buildings 2**(office) | **Public buildings 3**(office and religious) | **Public buildings 4**(spectacular) | **Housing(** | **Production facilities** | **Architectural environment design** | **Restoration of architectural monuments** | **Reconstruction of historical architectural objects** | **Restoration and modernization of urbanized areas** | **Urban planning** | **Landscape architecture** | **Innovative design technologies** | Note |
| 1 | 2 | 3 | 4 | 5 | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** | **16** | **17** | **18** | 20 |
| 1 | … | … | … | … |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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*\** indicate one of the qualifications – **M (Master) or B (Bachelor)**;*\*\* indicate one of the nominations according to the list provided*

*Letters of consent in the amount of \_\_\_ added*

Head of the competition committee \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  *(signature) (last name, initials)*

 2025