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| LOGO 2 | REPUBLIQUE ALGERIENNE DEMOCRATIQUE ET POPULAIRE  MINISTERE DE L'ENSEIGNEMENT SUPERIEUR  ET DE LA RECHERCHE SCIENTIFIQUE  UNIVERSITE BATNA 2 MOSTEFA BEN BOULAID  INSTITUT HYGIENE & SECURITE  DEPARTEMENT SECURITE INDUSTRIELLE  TEL / FAX : 213 (0)33 23 01 43 |  |
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***AUTORISATION DE SOUTENANCE***

***MEMOIRE DE MASTER ACADEMIQUE***

***EN ……………………………….***

***Promotion …………***

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| **Thème** |
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| **Résumé (5 lignes max)** |
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| **Nom et Prénom de l’étudiant** | **Numéro d’inscription** |
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| **Encadreur** | |
| **Nom et Prénom** |  |
| **Grade** |  |
| **Département** |  |
| **Avis & Signature** |  |
| **Date** |  |

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| **Responsable de l’Equipe de Formation Master** | |
| **Nom et Prénom** |  |
| **Grade** |  |
| **Département** |  |
| **Avis & Signature** |  |
| **Date** |  |