



LUDWIG-
MAXIMILIANS-
UNIVERSITÄT
MÜNCHEN

Fakultät für Chemie und Pharmazie



Registration for the PhD Program at the Faculty of Chemistry and Pharmacy

(to be presented at the PhD Office at the Faculty of Chemistry und Pharmacy
Butenandtstr. 5-13, 81377 Munich, House F, 2.060, Tel: 21 80 – 77 001
Please call in order to arrange an appointment)

**Registration must be completed no later than three months after
starting your PhD work (Section 6, Paragraph 2, Sentence 3)**

This page must be signed by the supervisor:

This is to certify that,

Mrs. / Mr. *)

(Complete name, as in passport)

has started / will start *) on his / her *) PhD in the field of:
(Date)

- | | |
|---|--|
| <ul style="list-style-type: none"> <input type="radio"/> Inorganic Chemistry <input type="radio"/> Didactics of the Chemistry <input type="radio"/> Biochemistry <input type="radio"/> Organic Chemistry <input type="radio"/> Pharmacology <input type="radio"/> Clinical Pharmacy | <ul style="list-style-type: none"> <input type="radio"/> Pharmaceutical Biology <input type="radio"/> Pharmaceutical Chemistry <input type="radio"/> Pharmaceutical Technology <input type="radio"/> Physical Chemistry <input type="radio"/> Theoretical Chemistry |
|---|--|

(according to Section 1 of the Doctoral Regulations of 28/11/2011)

under my supervision (according to Section 1 of the Doctoral Regulations of 28/11/2011)

The admission requirements according Section 3 have been fulfilled.

Munich,
(Date)

.....
(Signature of the supervisor)

.....
(Name of the supervisor in block letters)

*) Delete as appropriate

Postanschrift:
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D-81377 München

Tel.: (089) 2180-77001
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Bus-Haltestelle: Wadhüterstr. 266 / 268



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This page must be signed by the PhD candidate:

I, Mrs. / Mr. *)
(Complete name, maiden name, if applicable, as in your passport)

Date of birth Place of birth (city, country)

Address in Germany:

Postal Code City

hereby declare that:

- I have already tried to submit my thesis elsewhere
 - yes
 - no
 if yes,
 - successfully
 - unsuccessfully
- I have already tried elsewhere to take my oral PhD-examination
 - yes
 - no
 if yes,
 - successfully
 - unsuccessfully
- I have no entries in my certificate of good conduct.

Munich,
(Date)

.....
(Signature of the PhD candidate)

*) Delete as appropriate

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