External Master's Thesis Application and Registration Form

Student Information:

Name:	
Matriculation Number:	
Study Program:	
Current Semester:	
Current ECTS Credits:	

Thesis Information:

Preliminary Title of the Master's Thesis:	
The Master's Thesis is:	
□ theoretical □ experimental	
Duration of the Master's Thesis:	
Start date (Mondays only):	
Submission date:	
Signature of the student:	Date:
External Supervisor:	
Name:	
Title:	
Institution/Company:	
E-Mail Address:	
Is the external supervisor habilitated or equivalent?	Yes 🗆 No 🗆
Confirmation by the External Supervisor:	
I am pleased to confirm the external supervision of this Mas	ster's thesis.
Signature of the external supervisor:	Date:
Confirmation by the Internal Supervisor:	
Name of the internal supervisor:	
• I hereby confirm that the external supervisor mee supervisor. If this is not the case, I will take full res	ts the necessary requirements and is equivalent to a habilitated sponsibility for supervising the Master's thesis.
Signature of the Internal Supervisor:	Date:
Additional Documents:	
The following documents must also be attached:	
Informal written request with an explanation for c	conducting the work outside of the Faculty of Biology.

• Timeline for the thesis project, signed by the external supervisor, with monthly planning.

Notes:

- The application must be submitted and approved by the Examination Office before the start of the Master's thesis.
- Processing time is 2 weeks. Therefore, students must submit the application at least 2 weeks prior to beginning the Master's thesis.