INSTITUTE FOR MOLECULAR SYSTEMS ENGINEERING AND ADVANCED MATERIALS

UNIVERSITÄT HEIDELBERG ZUKUNFT SEIT 1386

Master's Program Molecular Systems Science and Engineering

# Master's Thesis Application

First Name _____ Student ID _____

Last Name _____ Date of Birth _____

Address _____

Date of Application _____ Submission Deadline _____
(6 months after application)

Topic of Thesis _____

Host Lab (group, institute, address) _____

In-Lab Supervisor _____

Date/Signature Student* _____

*by signing, the student declares
1) To have fulfilled all the requirements for assessment specified in the examination regulations
2) That the right to examination has not expired
3) That the supervising reviewer has the right to use the results
4) That plagiarism checks may be carried out

| Reviewer I | | Reviewer II | |
|---|---|---|---|
| Name | | Name | |
| Address | | Address | |
| | | | |
| Tel. | | Tel. | |
| email | | email | |

Date/Signature Reviewer I _____

Date/Signature Reviewer II _____

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To be filled out by the administration:

All necessary coursework examinations have been completed **[ ] YES** **[ ] NO**

Date/Signature Examination Office _____

Application Approved **[ ] YES** **[ ] NO**

Date/Signature Examination Office _____