

University of Cologne

Degree Committee
Master of Science in Biological Sciences



Laboratory Module

Certificate of Completion

Degree Committee
MSc in Biological Sciences
Zùlpicherstr. 47a
50674 Cologne
phone +49 221 470 4328
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Student name _____

Matriculation number _____ e-mail _____

Module start date _____ Module end date _____

Name of supervisor and institution where module was carried out _____

Title of project _____

Title of research talk _____

Field of oral exam _____ (e.g. Genetics, Ecology, Neurobiology etc.)

	% of final grade	Date of examination	Grade	Date of re-examination	Grade
Lab report	50 %				
Oral exam	50 %				

Grades: 1.0 – 1.5 (very good), 1.6 – 2.5 (good), 2.6 – 3.5 (satisfactory), 3.6 – 4.0 (sufficient), > 4 (insufficient)

Date _____ Supervisor (signature) _____

(Institutional seal)

Supervisor, send examination papers in a sealed envelope to the Degree Committee: (1) Certificate of Completion and (2) oral exam. Sign the lab report on front page.

12 Credit Points are granted by the degree committee

Date _____

(Dr. Jan Weber)

Final Grade

(Degree committee member only)