

Registration of the Master's Thesis

An den
 Prüfungsausschuss für den Studiengang
 Master of Science in Biological Sciences
 der Universität zu Köln
 Zulpicher Str. 47a
 50674 Köln

Personal data	
Last name, first name	
Address	Street & Number
	Zip Code & City
Matriculation number	
Email-address	
Phone number	
Master's Thesis (6 month)	
Planned start date	The registration must be submitted at least 7 days before the start of the thesis
Topic (working title)	
Institute & Address	
Thesis supervisor (1 st reviewer)	
2 nd reviewer	
External supervisor (for external thesis only)	
Signatures (declaration of agreement)	
Thesis supervisor	Signature _____ (Date)
External supervisor (if applicable)	Signature _____ (Date)
Student	Signature _____ (Date)
Filled in by the office of the examination board	
Date for submission of the thesis	_____ Signature
	_____ (Date)