
SEMINAR REGISTRATION FORM (ACC 750)

Name:
Address:
Phone:
Email:
Student ID:
Field of Study: MMM / BWL [] Other:

Topic preferences (please rank all topics by topic number)

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12.

Writing period

Fast Close [] Final Close []

Grades

A. Bachelor University:
 No. of semesters
 Graduation year:
 Final grade:
B. Master No. of semesters:
 Average grade:

Applicants also have to **submit a current version of their transcript**, their **bachelor transcript** and their CV.

.....
(date)

.....
(signature)