APPLICATION FOR THE ASSIGNMENT OF A MASTER'S THESIS

Name: .....

Address: .....

(Mobile) Phone: .....

Email: .....

Student ID: .....

Field of Study: MMM ( ) Other: .....

INTENDED START DATE: .....

TOPIC PREFERENCES / AREAS OF INTEREST:

.....

.....

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ACADEMIC RECORD

A. Bachelor University: ..... Final Grade: .....

Semesters of Study: ..... Date of Graduation: .....

Bachelor Thesis (Title & Grade): .....

B. Master Seminar

Chair: ..... Date: ..... Grade: .....

Topic of Seminar Paper:

.....

.....

MISCELLANEOUS

Current Status / Term of Study (Semester): .....
Intended Date of Graduation: .....
Prospective Employer (if unknown, future career plans): .....

I acknowledge the conditions stipulated for the assignment of master's theses.

....
(Date) (Signature)

Please include the following documents with your application:
- Certificate of bachelor degree
- Current transcript of records