

APPLICATION FOR DEGREE PROJECT

Master Thesis

Record of min 60 ECTS

Information concerning email address, telephone number etc, which you submit on this form should be valid during the period you conduct your degree project. Possible changes shall be sent to the people concerned via email.

Student:

Application filed at/Most recently updated at, date:

Name:	
students' register no.	
Email:	
Address:	
Postcode/town/country:	
Telephone nr, mobile phone nr:	
Year of registration (for ex SM05):	

Degree project:

☐ Degree project outline submitted

Preliminary title:	
The work is scheduled to start, date:	
Attached please find:	
1. confirmation of enrollment "Space Science and Technology" for the actual semester	
2. record of ECTS (minimum 60 ECTS-credits subject to § 9 Examination Regulations)	
3. Name of examiner who assigns the topic, suggestion of desired topic	
4. suggestion on desired examiner for the colloquium	
5. Declaration by the candidate, that he/she has not failed a similar topic or is involved with another University.	

Supervisor:

Name:		
Company/organisation:		
Section:		
Address:		
Email address:		
Telephone number:		

Examiner:

JMUW

LTU

Name:		
Department:		
Address:		
Email address:		
Telephone number:		

Commenced degree project:

Examiner approves start, sign:	
Reported in database date, sign:	

Lehrstuhl für Informatik VII

Am Hubland

D-97074 Würzburg

Fax.: +49-931-31-86679