

Registration of a Master Thesis within the Chemistry Study Course

Surname: _____

First name: _____ Street and House number

Date/place of birth: _____

Matriculation number: _____ Postcode and City

Email address: _____

To
Head of Examination Office Chemistry
Faculty of Chemistry and Biochemistry
Ruhr-Universität Bochum
Universitätsstr. 150
44801 Bochum

In accordance with §16 of the study regulations for the Chemistry Master study course as amended on 24.08.2015 I herewith wish to apply for permission to register and complete my Master Thesis.

Prof. Dr. _____ and I have agreed upon the following topic of the Master thesis and declare that regarding this topic I have undertaken **no preparatory work** other than the mandatory curricular practical courses with their given CPs as required by the examination regulations.

I am registered as a Master student in the Chemistry study course for winter-/summer semester 20...../ 20..... and I acknowledge that I am aware of the study regulations of the Faculty of Chemistry and Biochemistry for the aforementioned study course.

Date:
.....
(Signature)

Supervisor's Declaration

I have proposed and will supervise the above topic. I declare that regarding this topic the applicant has undertaken **no preparatory work** other than the mandatory curricular practical courses with their given CPs as required by the examination regulations.

Date:
.....
(Signature)