



Master's thesis registration form

1. attempt 2. attempt

(Please ensure accuracy of all information given below as they will be used for your degree certificate!)

.....
Family name, first name

.....
Matriculation number

.....
Date of birth

.....
Place and country of birth

.....
Address

.....
Postcode, city

.....
Telephone

.....
E-mail

Preferred admission date: 15(Month) 20.....

I hereby request the admission for the master's thesis in the study programme Master of Arts:

..... (name of the study programme) at
the Friedrich Schiller University Jena.

Preferred title of the master's thesis

.....
.....

Proposed reviewers

First reviewer:

Second reviewer:

Please enclose the following supporting documents

confirmation of the title by the reviewer (see overleaf)

proof that you met language requirements (in accordance with the valid study regulations; where applicable certified copy of your secondary school leaving certificate).

Statement

I confirm that I am familiar with the rules of the master's examination regulations on the examination process and deadlines. I will complete and pass all assessed course work and examinations required, including the internship report, before the official end of my studies, i.e. removal from the register of students ("Exmatrikulation").

Furthermore I confirm that I have not definitely failed a similar examination at another institution of higher education and that I am not involved in a pending examination process in a similar study programme.

Place and date

Signature.....



Your personal data

Family name, first name:

Matriculation no.

Number of semesters in this field of study

Study programme

Confirmation by the examiner

Title of the master's thesis

.....

.....

First reviewer

Institute/department

..... (stamp of the institute)

Signature

Date

Second reviewer

Institute/department

..... (stamp of the institute)

Signature

Date