



## Application for Admission to Master Thesis

(must be handed in at least 2 weeks before the starting date)

Family name: \_\_\_\_\_ Given name: \_\_\_\_\_

Matrikel nr.: \_\_\_\_\_ Study course: \_\_\_\_\_

Email: \_\_\_\_\_ Mobile number: \_\_\_\_\_

Start: \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_ Duration: 20 weeks

**Title In English + short project abstract for the Master Thesis, one A4 document**

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Supervisor / First revisor at Rostock University: \_\_\_\_\_  
(signature)

Second revisor / Supervisor at the Company (if necessary): \_\_\_\_\_  
(signature)

\_\_\_\_\_  
Date and signature of the student

Prüfungsausschuss:

Zustimmung

Ablehnung

\_\_\_\_\_  
Datum und Unterschrift PA