

Application for admission to Bachelor's/Master's thesis

Philipps University Marburg

Department of Social Sciences and Philosophy

Examination Office

Ketzerbach 63

35032 Marburg

I. Personal details

Surname:

First name/s:

Student number:

Date of birth:

Place of birth:

Your address:

Telephone number:

Student AND private e-mail*:

*Exclusively for use for information on the graduation process

Degree: Bachelor Master

The thesis should be prepared as follows:

Joint project with the student

Individual work

Course of study (with focus area, if applicable):

II. Declaration by the adviser

Name of the first reviewer: _____

Name of the second reviewer: _____

I hereby declare that I am willing to take the examination:

Signature of first reviewer

Signature of second reviewer

I am hereby completing my binding registration for the bachelor's/master's thesis and confirm that the information I have provided is correct.

Place, date

Signature of the candidate