



Registration form for Master's thesis

Name of student: _____

Matriculation Number: _____

ECTS requirements met: ☐

Mandatory for thesis registration in accordance with MSc Neurosciences 2018 study regulations (publ. Nov 29, 2019)

Place, date

Signature MSc Teaching Coordinator

Only proceed after confirmation from Teaching Coordinator. Signature can be obtained via e-mail.

Thesis start date: _____

Thesis due date: _____

in accordance with study regulations §14(7)

Name of internal supervisor: _____

Name of external supervisor: _____

Institution of external supervisor: _____

(only required for thesis outside of LMU Faculty of Biology or abroad)

Supervising laboratory: _____

Title of Master's thesis: _____

We confirm that the information provided above is correct and complete to the best of our knowledge:

Place, date

Signature student

Place, date

Signature internal supervisor

To be filled out by the MSc Examination Board

The topic of the Master's thesis and indicated supervisor(s) have been approved:

Place, date

Signature Chairperson of MSc Examination Board