

Application form Master Astrophysics (status 12/22)

An den
Vorsitzenden des Prüfungsausschusses Physik
Prof. Dr. Hartmut Schmieden
% Prüfungsamt Physik
Nussallee 12 (PI)
53115 BONN

send to Prüfungsamt, not Prof. Schmieden

mail to: pa@physik.uni-bonn.de

to be filled in by the candidate

.....
(Name) (First Name) (Matriculation No.) (Date)

Herewith I apply for approval of a Master Thesis, including the modules ^(a) astro940, -950, -960, with the provisional working title:

.....
.....

under the supervision of Prof. / Priv. Doz. requested start date: ^(b)

Second evaluator Prof. / Priv. Doz.
(required only in case of external thesis)



.....
Signature candidate

to be filled in by the supervisor

Project and supervision

don't require physical presence of the student

require physical presence of the student, and



organisational reasons prohibit a later start

please observe back of form sheet!

special equipment is indispensable

a later start in all probability will cause a delay
of the final degree by one semester.

.....
Signature supervisor

^(a) the examination office will register the modules on *Basis*.

^(b) final start and end date will be approved by the examination office. The end (= latest submission) date is put to *Basis*. Extension is possible on duly motivated request 4 weeks prior to the end date (c.f. §17, Abs.7 MPO-Astro).

to be filled in by the supervisor

If, on the front page, "organisational reasons" was checked to prohibit a later start of the thesis, then please here specify:

- A temporal shift in all likelihood will cause an increase in the number of theses to be simultaneously supervised at a later time, which exceeds the room (lab/office) and/or personnel capacity of the work group.
- the intended (research) topic can not be offered at a later time, due to temporal restrictions within the research project.
- other reason (please write):

Ich habe bereits an dieser Fakultät einen Master-Studiengang erfolgreich absolviert bzw. werde an dieser Fakultät einen weiteren Master-Studiengang absolvieren.

- Ja (Studienprogramm: _____) Nein

I have already successfully completed a master's degree at this faculty or will complete another master's degree at this faculty

- Yes (Study program: _____) No

filled in by the examination office

date:

start date
board

end date

approved:

Head of examination