



## Application for Admission to the Master Thesis Defence

Name:

Address:

E-mail:

Title (identical to the title of the submitted thesis) :

**1<sup>st</sup> Referee:**

Institution: Hochschule Geisenheim University

**2<sup>nd</sup> Referee:**

Institution:

**Local Supervisor:**

**Proposed period of time for the defence\*:**

(\*Please fill in a period of time of at least 3 weeks. The date of the defence takes place at the earliest three weeks after your master thesis is submitted.)

**Date and Signature** (Student).....

*To be filled in by the Hochschule Geisenheim University*

**Master Thesis delivered in due time on:** .....

Sign.: .....

**All Modules of the 2nd study year passed with success** ( ) yes ( ) no

**120 ECTS points gathered (including Thesis )** ( ) yes ( ) no

(see document(s) from 2<sup>nd</sup> year's partner(s))

**Proposed date for the defence on:** ..... **at:** .....

Date: .....

Signature (Program Coordinator): .....