

## Application for external conduction of the Master's thesis Master's program Biology

Name, first name: ..... Student ID: .....

Complete mailing address: .....

Phone: ..... Zedat e-mail: .....@zedat.fu-berlin.de

mobile: ..... private e-mail: .....

I hereby apply for an external Master's thesis.

*(Please note, that the registration for the Master's thesis is done only by also submitting the document "Application for registration of the Master's thesis", by naming an internal second examiner from the Institute of Biology at Freie Universität Berlin and by fulfilling all requirements according to the Study and Examination Regulations.)*

The thesis should be carried out in the following area (brief description of the research area/topic etc.):

**The local first examiner (Professors and Private Lecturers are authorized) for the thesis (external) is:**

.....  
*(Name, first name)*

**The thesis is carried out at:**

*(Complete official business mailing and e-mail address of the examiner):*

**My second examiner at the Institute of Biology is:**

.....  
*(Name, first name)*

.....  
Place, date

.....  
Signature of Applicant

***Not to be filled out by the student:***

---

Zustimmung wird erteilt .....  
Datum / Vorsitzende des Masterprüfungsausschusses