

DECLARATION OF PUBLICATIONS MONOGRAPH

according to the currently valid version of the doctoral regulations of the Department of Biology, Chemistry, Pharmacy

Last name doctoral studer	nt	First name doctoral student
Hereby I confirm that I have not published my thesis either in part or as a whole.		
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Title supervisor	Last name supervisor	First name supervisor
The public number	cation(s) will be attached as	separate pdf-file(s).
Date		Signature docotral student