Application for extension of the Master's thesis





Name:	Date:
iviatriculation Nr:	Study programme:
First Examiner:	
☐ Individual work ☐ Collaborative work: with	
Signature Application:	
Justification for the extension:	
☐ Case of illness (sickness certificate must be attached): The extension is extended by the duration of the sick days - max. number of weeks see associated SER. An attempt that is cancelled due to prolonged illness will not be counted towards the retake options.	
☐ The following reasons for which the student is not responsible:	
Fortancian les consider	
Extension by weeks (max.	
Submission date so far:	
Statement first examiner: (must support in the event of illness)	
Supported:	□ yes □ no
Signature first examiner:	
Decision Examination board:	
Approval:	□ yes □ no
Signature Examination board:	

^{*} If approved, a new submission date will be deposited at the Examination Office. Status January 2018