



Application for admission tot he colloquium

surname:	first name:
Matriculation number:	
adress:	
have not yet attempted to take the	o the colloquium supplementing the final thesis. I declare that I e same or a corresponding examination. Examination results that ration for the thesis are now available.
	date and signature of applicant
Titel of the final thesis:	
was carried out under my guida sufficient (ausreichend).	nce/supervision. I will assess this thesis with at least the grade
first examiner:	date and signature of first examiner
I supervised the above-mention the grade sufficient (ausreicher	ed thesis as a co-supervisor. I will assess this thesis with at least nd).
second examiner :	date and signature of second examiner
The colloquium will held on This will require a room at FF	at . I Münster? yes no
Will be filled in by the Exami	nation Office:
All requirements for authorisatio	n have been met: yes: no:
The application is granted.	
	date The Chairman of the Examination Board of the