

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Chairman, Doctoral Committee  
Dean`s office  
Faculty of Mathematics and Computer Science  
Campus E2 4, Room 110

Date:

**Request for the Entry into the Faculty’s register of doctoral candidates**

Dear Professor Hack,

I hereby apply for the entry into the Faculty’s register of doctoral candidates. The following documents are enclosed:

* Diplom or Master certificate in mathematics/computer science from a German university
* Other Diplom or Master certificates (subject to acceptance by the doctoral committee)
* Qualifying Examination certificate from the Graduate School of Computer Science

My research topic lies in the field of: Mathematics / Computer Science / Bioinformatics.

Title of thesis:

“\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_”

Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Potential academic mentor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

After successful defence of the thesis the doctoral degree should be:

* Doctor of Natural Science ( doctrix rerum naturalium – Dr. rer. nat., female)
* Doctor of Natural Science (doctor rerum naturalium – Dr. rer. nat. male)
* Doctor of Engineering (Doktor-Ingenieurin – Dr.- Ing., female)
* Doctor of Engineering (Doktor-Ingenieur – Dr.- Ing., male)
* Doctor of Philosophy in Natural Science (doctrix philosophiae naturalis – Dr. phil. nat., female)
* Doctor of Philosophy in Natural Science (doctor philosophiae naturalis – Dr. phil. nat., male)

I confirm that I have not submitted a doctoral thesis for examination in the past.

Name / Signature

***Declaration*** *(to be filled in by the supervisor)*

*I agree to supervise Mr / Ms\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Matriculation number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, born on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_as a doctoral student.*

*Name / Signature*