



To the Dean of the Faculty of Chemistry and Pharmacy Am Hubland 97074 Würzburg first name / last name street/number postal code / place of residence e-mail address phone/mobile (optional) registration number:

place, date (dd MONTH yyyy)

## **Application for admission**

original signature (first name / last name)

Dear Dean,
I hereby request admission relating to the doctoral examiniation at the Faculty of Chemistry and Pharmacy.
Title of my doctoral dissertation (thesis):
<b>,,</b>
which was completed under the supervision of:
Kind of dissertation:
Second opinion (proposal):
I give my consent to receive information about any decisions relating to my doctoral procedure by electronic means to the above mentioned e-mail address.
I will immediately notify the Dean's Office of any changes to my personal data.
Regards,