

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)

Acceptance as a doctoral candidate

Dear Dean,

I hereby request acceptance as a doctoral candidate in accordance with § 8 (1) of doctoral regulations of the Faculty of Chemistry and Pharmacy, dated 9 August 2017, as well as § 5 of the framework for doctorates at Julius-Maximilians-Universität Würzburg, dated 8 February 2016.

My doctoral supervisor is:

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,

original signature
(first name / last name)