

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 doctoral examination

Dear Dean,

I hereby request admission relating to the doctoral examination at the Faculty of Chemistry and Pharmacy.

Title of my doctoral dissertation (thesis):

„.....

“

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,

 original signature
 (first name / last name)