



## Application for Admission to the Bachelor/Master Thesis

An die  
Universität Bremen  
Prüfungsamt FB 3  
Bibliothekstraße 5  
28359 Bremen

Information of the applicant:

Matriculation-No.:

Name:

First Name:

E-Mail:

**Degree:** Bachelor Master

**Degree program:**

**Agreement:**

The thesis will be written as individual work a team work with the following additional members:

in german english.

Topic of the thesis (in german **and** english; please use the backside if needed)

**First examiner:**

Name:

Department:

Building:

Full address (if external):

E-Mail:

Signature of first examiner: \_\_\_\_\_

I hereby register for the thesis and certify that the above information is complete, true and accurate.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of applicant

**Note:**

The student fulfills the admission requirements for the thesis. The examination Board approves the application.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Head of Examination Board