

Request for extension of the submission date of the master thesis

Name:	Study Course: <input type="checkbox"/> Elektrotechnik und Informationstechnik <input type="checkbox"/> Wirtschaftsingenieurwesen <input type="checkbox"/> Gebäudesystemtechnik <input type="checkbox"/> Electrical Engineering	Degree: <input type="checkbox"/> Bachelor <input type="checkbox"/> Master
First name:		
Address:		Matrikel-ID:
E-Mail:		1 st Supervisor:

Dear Sir or Madam,

I hereby request an extension of the completion date of my master thesis.

Regular completion date:		Desired completion date:	
Reasons (in case of illness, please submit a medical certificate):			

date and signature

Statement of the supervisor:

I agree to the request:	<input type="checkbox"/> yes <input type="checkbox"/> no	New completion date:	
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date and signature supervisor

Approval Head of the Examination Board

I agree to the request	<input type="checkbox"/> yes <input type="checkbox"/> no	New completion date:	
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date and signature Head of the Examination Board