

SSC Studierenden-Service-Center

Application for Extension of Thesis Topic Writing and Research Time

→ To be filled in by the student:		
Last name, first name: _		
Student number: Degree program:		
Degree:	Bachelor's \square	Master's
Writing and research tin	ne has been initially agre	eed until
1. Examiner:		Department:
I herewith apply for an e	extension of my thesis t	opic writing and research time by days/ weeks.
Reasons (References, Attestation and such are to be enclosed.)		
The amended submission date will be published in the QIS Transcript of Records under examination number 8000.		
Date:		Signature:
→ To be filled in by 1st examiner:		
I herewith □ agree □	☐ disagree with the applica	ation for an extension of the writing and research time. (Refusal to confirmation must be explained on the back page.)
I can suggest as the amended date for submission:		
Date:		Signature:
→ To be filled in by Departmental Examination Board:		
The extension of writing and research time is confirmed not confirmed (Refusal to confirmation must be explained on the back page.)		
Amended submission date:		
Date:		Signature: