

Registration of the Master's Thesis
Master's program „Data and Computer Science“
(Examination regulations of 29 September 2021)

Surname _____ Registration no. (Matr.Nr.) _____

First name _____

Confirmation: I hereby confirm that I am registered student at Heidelberg University and did not lose my entitlement to take examinations in the Master's program „Data and Computer Science“ or degree programs with related contents. I achieved at least 45 credits in course work (credits of the application area not included).

Signature Candidate

Master's thesis:

Examiner _____

Topic of thesis (working title): _____

Preparation period Beginning _____

End _____

Second examiner (proposal) _____

IMPORTANT NOTE: Please submit this document before the beginning of the preparation period, but at the latest 14 days after.
Submission of the thesis before the submission deadline is only possible in justified exceptions.

Signature Candidate

Signature Examiner

Receipt Examination Office: _____

Important information (for details see examination regulations)

- The examiners need to be entitled to administer examinations in Computer Science at Heidelberg University
- The working title can be changed in agreement with the examiner.
- The submission deadline is 6 months after the beginning of the preparation period.

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Voluntary declaration of the candidate

I hereby allow the Institute of Computer Science to publish an electronic version of the Master's thesis for third parties on the internet.

Heidelberg,

Signature

For statistical purposes:

The thesis was written in cooperation with an industrial company.

Name of the company:

The following request must be submitted before the degree certificate can be issued.

Request for the award of the Master's degree

I hereby request to have the Master's degree awarded..

I have successfully completed required coursework amounting to 120 credit points including the application area as well as covered three areas with 6 credits points each. I successfully passed the Master's thesis and Master's colloquium.

Name Candidate: _____

Date, Signature Candidate

Date, Confirmation Examination Office

The request is approved:

Date, Chair of the Examination Office