



Surname:	
First name:	
Matriculation-Nr.:	Course of studies:

I hereby apply for admission to the Colloquium.

First Examiner:	
Second Examiner:	
Date of submission for thesis:	
Date of Colloquium:	

The appointment is arranged with both examiners. Permission for external observers to attend

☐ agree      ☐ disagree

**Please inform us how you would like to receive your degree certificate**

☐ I would like to pick it up from the department's office  
In this case please let us know your email address in order to contact you:

\_\_\_\_\_

☐ Please send it to the following address

Street: .....

Postcode/Town : .....

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

The requirements for the exam regulations are fulfilled (confirmed by the Examinations Office)	Date, Signature
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**Attachments:**

Supporting documents, which have not yet been submitted to the examination board, according to the relevant examination regulations admission requirements.

**Notes:** The application has to be handed in to the department in Rheinbach. Please note the stipulations of the current examination regulations!