

Please fill the form on the computer, if possible.

To the Chairman of the
Doctoral Board of the
Faculty of Science

Request to open the examination process for a doctoral degree _____
nach der Promotionsordnung vom 18.09.2013

Family name	First Name	Name of birth	Matriculation No.
Date of birth	Citizenship	Place of birth	
private address		business phone number.	
		private phone number	
e-mail			

Institute and teaching unit of the Faculty	
principle supervisor	First Reviewer: <input type="checkbox"/>
second supervisor	First Reviewer: <input type="checkbox"/>
Mentor	
scientific discipline	
Title of the thesis	
<input type="checkbox"/> if so, interdisziplinäre thesis (important for the composition of the examination committee)	
<input type="checkbox"/> if so, cumulative thesis	

Attached documents: (see § 12 (1))	
<input type="checkbox"/>	4 copies of the thesis with a CD in one copy <input type="checkbox"/> if cumulative thesis: 4 copies of a statement of own contribution with a confirmation by the principle supervisor (§ 11 (2))
<input type="checkbox"/>	10 copies of a scientific abstract with name and title of the thesis
<input type="checkbox"/>	Certified copy of the agreement of supervision (or simple copy if presenting the original)
<input type="checkbox"/>	4 copies of a CV (signed)
<input type="checkbox"/>	4 copies of a list of publications (if submitted: status of the publication)
<input type="checkbox"/>	Certified copy of the diploma/master degree and supplement (or simple copy if presenting the originals)
<input type="checkbox"/>	Documentation of teaching experience
<input type="checkbox"/>	Documentation of participation in the doctoral seminar
<input type="checkbox"/>	Immatriculation-document as doctoral student – not student-ID (§ 8 Abs. 6) or <input type="checkbox"/> Police clearance certificate („Polizeiliches Führungszeugnis“), if the applicant has not been a student for more than 3 months or an employee in public or ecclesiastic services
<input type="checkbox"/>	Generally understandable summary in German (with author, institute, title of the thesis – max. 1 page)
<input type="checkbox"/>	<i>if cotutelle</i> : cooperation-contract of a joint doctoral procedure between the University of Potsdam and the foreign university approved of the faculty board as well as an application of both of the supervisors (§ 10)

Supervisors and mentors suggest three reviewers one of them must be an external (§ 6 (1)).

Please check their availability in advance.

2. Reviewer			
Title	Name	First name	e-mail
if so, equivalent for habilitation:			
Institution			
Address		ZIP/postal code, city, state	
Justification*: Are there any scientific affiliations or personal relationships between candidate, supervisor or members of the supervisor's group; are there any common publications existing or in preparation? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, specify please			

3. Reviewer			
Title	Name	First name	e-mail
if so, equivalent for habilitation:			
Institution			
Address		ZIP/postal code, city, state	
Justification*: Are there any scientific affiliations or personal relationships between candidate, supervisor or members of the supervisor's group; are there any common publications existing or in preparation? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, please specify			

* Short statement indicating the scientific discipline and the expertise of the suggested person

Suggestion for further examination committee members

In addition to the reviewers already mentioned pursuant to § 7 (2) the chairman/chairwoman and two other professors or habilitated members have to be proposed. All members of the examination committee - with the exception of the external evaluators - must be in an employment relationship with the UP or eg. lecturer of UP (§ 7 (2)).

For interdisciplinary thesis, all affected disciplines need to be considered by the selection of appropriate members from other institutes of the faculty as the professionally competent (§ 7 (3)).

For non-habilitated members of the examination committee a brief justification of the supervisor is required.

Chairman/chairwoman

5. additional member*	6. additional member*
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*(usu. habilitated or equivalent)

<p>I hereby declare that I have not submitted the thesis at any other university and that I prepared it out by myself only with the help of the indicated means.</p> <p>Potsdam,</p> <p>_____</p> <p>Signature of the doctoral candidate</p>
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<p>Hereby we recommend the opening of the examination process for a doctoral degree of Mr./Ms.</p> <p>_____ with the above stated reviewers and examination committee members. I have taken note of the dissertation.</p> <p>Potsdam,</p> <p>_____</p> <p>Signature of the principle supervisor</p> <p>_____</p> <p>Signature of the second supervisor</p>
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<p>Kenntnisnahme durch Promotionsbeauftragte/n des zuständigen Instituts und ggf. Bestätigung der Erfüllung der Auflagen gem. Betreuungsvereinbarung.</p> <p>Potsdam,</p> <p>_____</p> <p>Signature of the authorized representative in the Doctoral Committee</p>
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