To the Teaching Unit: *Climate, Earth, Water, Sustainability*

University of Potsdam | Faculty of Science

**Registration for the Master's Thesis Defense**

Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Matriculation number: \_\_\_\_\_\_\_\_\_\_\_

Title of the thesis: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Defense date and time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Venue of the defense: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please note: The defense must take place at one of the University of Potsdam's campuses. Please check the website for details on how to find a room.*

First reviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Second reviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Optional) Third member of the defense committee (name, institution):
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please note: In principle, the two reviewers (see above) act as examiners in the defense. The first reviewer is the chairperson of the committee and must ensure that the thesis has at least been passed at the time of the defense (see §30(11) BAMA-O).*

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

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 *Signature of candidate Signature of the first reviewer*

The proposal for the composition of the examination committee is approved:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Signature of the head of the examination board*

 ***Note:*** *The completed and signed form must be sent as a PDF by email to* *kubatzki@uni-potsdam.de****at least 10 days before the scheduled defense date.***

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**Registration for the Master's Thesis Defense**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **How do you prefer your defense?**

|  |  |
| --- | --- |
|  | Yes, I would like to invite everyone to my defense (CLEWS students, teachers and alumni).*.* |

|  |  |
| --- | --- |
|  | No, I prefer to exclude the public. |

|  |  |
| --- | --- |
|  | Others: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

*Please note that you can make your defence hybrid to allow more people interested in the subject to join. If you would like to do this, please create a Zoom link for your presentation and include it in the email with this signed application form.*

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes, I would like to offer it as a hybrid option.  |  | No, only in presence is fine. |

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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Join the CLEWS Alumni network (optional)***We cordially invite you to join our alumni mailing list to stay in contact with CLEWS after graduation. You will receive occasional updates and invitations to events. You can also use the list to get in touch with your former colleagues. If you would like to be added to the list, please provide us with the email address you will be using after graduation.*Email address (not *@uni-potsdam*): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*We would like to list your name, the title of your defense and supervisors on our website:*

|  |  |  |  |
| --- | --- | --- | --- |
|  | *Yes, please add my thesis title to the website.* |  | *No, I prefere not to be listed.* |

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