

Registration number

Degree program number

UK	066	863	
-----------	------------	------------	--

NOMINATION OF THE EXAMINATION COMMITTEE

Data of the Student

First name and Family name	
Phone number	
E-Mail	

Examination Subjects

1. Subject	Presentation and Defense of the Master's Thesis
2. Subject	
3. Subject	
4. Subject	

Linz, _____

Student Signature	
-------------------	--

Examination Committee

Head of Committee		(Signature)
1. Examiner		(Signature)
2. Examiner		(Signature)
3. Examiner		(Signature)
4. Examiner		(Signature)

Endorsement by the Praeses	
For the Vice Rector	

Please note

This form as well as the Master's Thesis and all other necessary documents must be submitted to the Examination and Recognition Services no later than **4 weeks** before the examination. The student is responsible for arranging the date, time and room of the examination and to disclose this information to the Examination and Recognition Services **no later than 10 days before** the examination. At this time **all prerequisites** for the second part of the Master's examination **must be fulfilled**.