

To  
The Dean of the Faculty for Chemistry and Pharmacy at the LMU  
PhD Office, House F, Room F2.060  
Butenandtstr. 5-13  
81377 Munich

## External PhD candidate in Chemistry or Pharmacy

Candidate:

Ms. / Mr. \*) .....  
(Complete name, including your maiden name, if applicable, as in your passport)

The provisional title of my dissertation is: .....

.....  
.....

and it has started / will start \*) on (date) ..... in the field of :

- |   |  |
|---|--|
| <input type="checkbox"/> Inorganic Chemistry    | <input type="checkbox"/> Pharmaceutical Biology    |
| <input type="checkbox"/> Didactics of Chemistry | <input type="checkbox"/> Pharmaceutical Chemistry  |
| <input type="checkbox"/> Biochemistry           | <input type="checkbox"/> Pharmaceutical Technology |
| <input type="checkbox"/> Organic Chemistry      | <input type="checkbox"/> Physical Chemistry        |
| <input type="checkbox"/> Pharmacology           | <input type="checkbox"/> Theoretical Chemistry     |

(according to Section 1 of the Doctoral Regulations of 28/11/2011)

I will complete my thesis at (full address of the external faculty, university, institute or enterprise):

.....  
.....

and my supervisor there will be (Title, complete name) .....

his / her \*) telephone No. .... E-Mail: .....

According to Section 7, Paragraph 1 of the Doctoral Regulations of 28/11/2011, I propose Ms. / Mr. \*)  
..... as my Fachvertretung (internal supervisor)

I have already obtained his / her \*) approval (see below).

....., Date .....

Signature of the candidate .....

....., Date .....

Signature of the external supervisor: .....

(please print) .....

I hereby declare my consent to represent the  
the above-mentioned candidate according to Section 7 Paragraph 1  
of the Doctoral Regulations of 28/11/2011 before the Faculty.

....., Date .....

Signature of Fachvertretung (internal supervisor): .....

(please print) .....

\*) Delete as appropriate

*This page must be signed by the PhD candidate:*

I, Mrs. / Mr. \*) .....  
(Complete name, maiden name, if applicable, as in your passport)

Date of birth ..... Place of birth (city, country) .....

Address in Germany: .....

Postal Code ..... City .....

hereby declare that:

- I have already tried to submit my thesis elsewhere
  - yes
  - no
- if yes,
  - successfully
  - unsuccessfully
- I have already tried elsewhere to take my oral PhD-examination
  - yes
  - no
- if yes,
  - successfully
  - unsuccessfully
- I have no entries in my certificate of good conduct.

Munich, .....  
(Date)

.....  
(Signature of the PhD candidate)

*Please also present at registration:*

*A university degree certificate (original and copy) with final grade in number, student transcript (original and copy) with grade scale, official translation of both (original and copy), permission from your university to embark on PhD studies, application for admission (cover letter), CV, printed online form "registration" and, if necessary, a presentation letter from your supervisor.*

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\*) Delete as appropriate