

Request for thesis extension/ change of Master's thesis title

Master program:

- Integrated Water Resources Management
- Natural Resources Management and Development
- Renewable Energy Management

Last name, first name:

Student ID:

Email address (TH):

Phone number:

Thesis advisor:

Second examiner:

I hereby request a change of my Master's thesis title:

original title:

new title:

I hereby request an extension of the original submission deadline by days
(max 28 days).

Explanation (In case of illness, please enclose a medical certificate):

Place, Date

Signature

I support the request

yes no

Date

Signature thesis advisor

I agree with the request

yes no

Date

Signature Chairperson of Examination Board